# WORKING ROUGH, LIVING POOR

Employment and Income Insecurities Faced by Racialized Groups in the Black Creek area and their Impacts on Health

PRODUCED BY:
Income Security, Race and Health Research Working Group

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Access Alliance
Multicultural Health and Community Services



Anxiety · Insomnia · Depression · Headache · Disempowerment · Allergy · Chronic Shoulder pain · Family tension · Low self-esteem · Grief · High Blood Pressure · Repetitive strain Injury · Addiction · Back Ache · Diabetes · Stress · Burn · Ulcer · Arthritis · Hip Pain · Urinary Tract Infection · No time to take care of one's health · No Time for Children · Cannot afford medicine · Knee Pain · Exhaustion · Foot Injury · Leg Pain

- Unstable jobs, part-time, casual, shift work, piece-meal jobs
- Temp agencies, jobs that keep workers on call
- Unsafe conditions of work
- Low-paying jobs
- Discrimination while looking for a job
- Jobs without benefits
- Harassment and discrimination at work
- Food insecurity and housing insecurity
- Juggling multiple jobs
- Jobs that devalue credentials, jobs that are not in one's field
- Income Insecurity. Conditions of inadequate income, irregular and unstable income cycles, and high levels of debt.

# Working Rough, Living Poor

**Employment and Income Insecurities faced by Racialized Groups and their Impacts on Health**

# About the Income Security, Race and Health Research Working Group

The Income Security, Race and Health (ISRH) Research Working Group is a interdisciplinary research group comprising of academics, service providers, and peer researchers interested in examining racialized economic and health inequalities. The group was established in Toronto in 2006 under the leadership of Access Alliance. The key goals of the ISRH team are to investigate the systemic causes of growing racialized inequalities in employment and income, and to document the health impacts of these inequalities. We plan to use evidence generated from this study to mobilize progressive policy solutions to overcome the systemic employment and health inequalities faced by racialized groups in Canada.

Our research is guided by principles of Community-Based Research (CBR). The ISRH team decided to focus the initial phases of the research in the Black Creek area, a low-income marginalized area in the northwest peri-urban region of Toronto. The team developed strong local partnerships in the Black Creek area and trained and engaged 10 low-income racialized residents from the Black Creek area as research collaborators ("peer researchers") at all phases of the project.

In 2007, we used photovoice methodology to document the impact of poverty on racialized residents of the Black Creek area. See www.accessalliance.ca/research/publications for a pdf copy of the *"Exposed"* photo book from this project. For the second phase (2008-2009), we conducted 8 focus groups with different racialized groups in the Black Creek area and 3 focus groups with service providers (management and frontline). This study has generated rich evidence about the strategies that racialized groups use to achieve employment/income security, the multiple systemic barriers and discriminations that they experience in the labour market, and the compounding negative impacts these experiences have on their health (at the individual, family and community levels). The present report, *Working Rough, Living Poor,* is based on findings from the second phase of research.

Research bulletins and other outputs from this study is available from www.accessalliance.ca

The salient findings from the second phase have already raised many new questions and have catalyzed new research projects. The third phase of our research (to be completed by end of 2011) involves conducting two rounds of in-depth family interviews with 12 precariously employed racialized families in the Black Creek area to better understand everyday family strategies for achieving employment/income security and family-level impacts of precarious employment and income insecurity. At the same time, Access Alliance has brought together another interdisciplinary research team to investigate the gendered barriers and de-professionalization that racialized immigrant women in Toronto face. This study on gendered barriers faced by racialized immigrant women is one of the six case studies of the Poverty and Precarious Employment in Southern Ontario (PEPSO) project led by Dr. Wayne Lewchuck and United Way Toronto with funding from a Community University Research Alliance (CURA) grant. Results from this study will be available in 2012.

## Acknowledgements

# List of Acronyms

| | |
|---|---|
| AAMHCS | Access Alliance Multicultural Health and Community Services |
| CBR | Community-Based Research |
| CCHS | Canadian Community Health Survey |
| CDA | Collaborative Data Analysis |
| CMA | Census Metropolitan Area |
| CRD | Collaborative Research Design |
| CURA | Community University Research Alliance |
| EMCONET | Employment Conditions Knowledge Network |
| EI | Employment Insurance |
| ESA | Employment Standards Act |
| FG | Focus Group |
| ILO | International Labour Organization |
| ISRH | Income Security, Race and Health |
| LSIC | Longitudinal Survey of Immigrants in Canada |
| PE | Precarious Employment |
| SDOH | Social Determinants of Health |
| WAC | Workers Action Centre |
| WHO | World Health Organization |

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# Executive Summary

This report by the Income Security, Race and Health research working group established by Access Alliance Multicultural Health and Community Services reveals how racialized people are being pushed into protracted conditions of precarious employment and income insecurity, and how existing employment training services and job search supports often prove ineffective. The study also clearly illustrates the everyday pathways through which these employment and income insecurity challenges damage health within these groups. "Working Rough, Living Poor" is the result of community-based research (CBR) conducted in Toronto's Black Creek community in collaboration with local residents trained to be community-based researchers by Access Alliance.

Results from this study indicate that racialized people face numerous systemic barriers, discrimination and challenges that prevent them from finding stable employment that they want. While some of these challenges are related to broader macro-economic shifts in labour market conditions (eg recession, outsourcing, rise of precarious forms of employment), study findings provide important insights into how racialized people are acutely affected by these conditions.

Findings highlight that discrimination, particularly race-based discrimination (based on socially produced ethno-racial features including skin colour, accent, religious or cultural affiliation), is a pervasive factor that undermines racialized people's search for stable employment. It also affects experiences within the workplace including the types of work that racialized people are given, wage, exposure to workplace injuries, occupational mobility, and job security. At the same time, there appears to be little or no formal recourse for racialized people to file complaint about or counter these experiences in the labour market. The Black community, the Arabic-speaking community (particularly the Muslim community), and people with low English language fluency experience racism more frequently and more intensely in the labour market. Lack of accessible and affordable childcare is also a major systemic impediment to finding and keeping stable employment, particularly for low-income racialized women.

Non-recognition of foreign credentials/experiences is a barrier that racialized immigrants from non-European countries face in severe and persistent ways. Cumbersome and lengthy professional accreditation process and precarious labour market conditions diminish opportunities for racialized immigrants to gain the so called "Canadian experience" in their field; many racialized immigrants get stuck in "survival," "odd" and temporary jobs that have little to do with their field.

Place-based stigma associated with the Black Creek area and the lack of stable jobs and rise in "temp agencies" in the area further exacerbate the systemic discriminations and barriers facing racialized residents in the area. We also found disturbing evidence about the long history of racial profiling in the Black Creek area, particularly targeting racialized youth, and how this has detrimental long-term impacts on employment security for these youth and their families. At the same time, the rich history of civic activism among Black Creek residents contributes in some ways to buffering the negative impacts and enabling residents to locate local barriers and experiences to larger systems of racialized inequalities.

In terms of health outcomes, results indicate that precarious employment and income insecurity expose racialized people to damaging health impacts including mental health issues (e.g., depression, addictions), digestive disorders (e.g., ulcers, constipation), physiological impacts (e.g., chronic exhaustion, weight gain/loss, chronic pain), cardiovascular impacts (e.g., hypertension, high blood pressure) and direct workplace injuries. A large percentage of study participants (40%) self-rated their current health as less than good ("fair" or "poor"); this is 4 to 5 times higher than

for average Canadians. Participants were particularly concerned about the impact on the health of family and children. Prolonged exposure to employment/income insecurity results in cumulative health strain, health deterioration, and disempowerment for racialized families.

Study finding that racialized workers are not able to get stable employment even after exhaustive use of available employment services calls into question the effectiveness of these services. Results show that services that are widely available (job search, employment workshops and temp agencies) are ineffective in promoting employment security; at best these provide short-term fixes and at worse they push people into precarious employment trajectory. Promising services that create long-term employment security, enhance skills, facilitate professional bridging, increase linkages with employers are largely inaccessible and underfunded. Efficiency geared and market-oriented funding, accountability and management of social services and social safety nets preclude service providers from providing high quality integrated services to economically marginalized people. Service providers also discussed operational and emotional impacts on them (e.g., having to work longer and in weekends, "vicarious trauma") due to increasing complexities of economic and health challenges faced by their precariously employed clients.

This report adds to the small but growing body of critical evidence showing that the Canadian labour market is highly racialized and "colour coded" and that access and quality of employment is segemented along ethno-racial lines (see Block and Galabuzi, 2010; deWolff, 2000; Galabuzi, 2006). Moreover, study findings highlight how structures of racialized discrimination and inequality are becoming entrenched within and through the growth of precarious forms of employment. Study results about adverse health impacts of precarious employment and income insecurity mirror findings from other larger studies, including those conducted by International Labour Organization and World Health Organization. Evidence about place-based barriers facing racialized residents of the Black Creek area provide rich qualitative insights about systemic causes and impacts of the growing spatial inequalities in Toronto.

Promoting employment security, income security and health for racialized families necessitates cross-sectoral collaboration (between governments from relevant sectors, community agencies, and business leader) to implement bold policy solutions geared explicitly at reversing the rise in precarious forms of employment and proactively overcoming systemic racialized inequalities in employment and health. What is required is a paradigm shift in which policy and social accountability is based not on the counterfactual logic of free-market efficiency and short-term fixes but rather on indicators with proven track record in promoting equity and society free of discrimination. We echo the following policy solutions proposed by Colour of Change campaign, Workers Action Centre, Office of the Fairness Commissioner, Law Commission of Ontario, International Labour Organization and the World Health Organization: (i) re-introduce Ontario Employment Equity Act to promote equity in hiring, promotions, pay and work allocation (and more effective enforcement of the Federal Employment Equity Act); (ii) extend "employee" designation to include all types of workers so they become eligible for standard rights, entitlements and benefits; (iii) improve enforcement of employment standards, workplace safety and other safeguarding measures, particularly for precarious employed workers; (v) expand extended health coverage and other entitlements that build long-term income/health security for all workers, including precariously employed workers; (vi) remove barriers faced by immigrants in getting their foreign credentials/experiences accredited and recognized; (vi) expand social services and social safety nets with proven track record for promoting long-term employment, income and health security; and (vii) eliminate systemic racialized discrimination in the labour market.

## Introduction

A growing body of Canadian and international evidence has documented how the macro-economic and policy shifts of the last couple of decades are systemically undoing the hard-earned historical advances in institutionalizing secure and stable forms employment that were protected with fair labour rights and workplace safety and supported with decent entitlements to enable working families live a life of dignity and health (Benach et al, 2007; Cranford et al, 2007; Evans and Gibbs, 2009; Peck and Tickell, 2002; Vosko, 2000). Instead, in the name of competitiveness and free-market economy, there has been a rise in what is being referred to as "precarious" forms of employment and "flexible" labour market practices that offer minimal and diminishing employment or income security, employment standard protection, safety, rights and entitlements to workers (Cranford et al, 2007; Evans and Gibbs, 2009; Goldring & Landolt, 2009a; Workers Action Centre, 2007). At the same time, the very political forces that are ushering the rise in precarious forms of employment are also cutting back and marketizing social services and social safety nets to the detriment of those who are negatively impacted by the erosion of stable forms of employment and labour protections (Baines, 2010; Clark, 2002; Evans and Shields, 2002; Peck, 2001; Richmond and Shields, 2004; Shields et al, 2005). Consequently, economic inequality has risen to unprecedented levels within cities, nations and globally (Yalnizyan, 2007; United Way, 2004). What is particularly disturbing is that the decline in stable forms of employment and the growing gap between rich and poor appear to be embedded in and exacerbate existing historical systems of racialized and gendered inequality (Vosko, 2000; Galabuzi; 2006).

Canadian census and city-level data indicate that members of racialized groups are disproportionately more likely than other Canadians to be unemployed or precariously employed, employed in low-wage sector, earn less, and face poverty (Block and Galabuzi, 2011; Galabuzi 2006; Ornstein, 2000). They are also more likely to live in sub-standard housing located in low-income, underserviced neighbourhoods (Galabuzi, 2006). This data is particularly disconcerting in light of the growing number of health studies from Canada and elsewhere that have shown a strong correlation between economic marginalization and poor health status (see Benach et al, 2007; Toronto Public Health, 2008; Lewchuck et al, 2006; Lightman et al, 2008). At the same time, a literature review that Access Alliance conducted in 2005 found a major evidence gap in Canada on health disparities resulting from racialized socio-economic inequalities. The literature review concluded the following:

> *Despite the evidence that suggests that poverty is becoming increasingly racialized in Toronto and Canada and that income inequalities are bad for health, there is a dearth of research that addresses the impact of socio-economic determinants on the health of racialized groups in this country. In particular, little research has addressed the health consequences of the barriers that racialized people experience in the labour market. (Access Alliance, 2006, p3)*

Access Alliance established an interdisciplinary research working group called Income Security, Race and Health (ISRH) in 2006 to fill this evidence gap. Guided by community-based research principles (CBR), the ISRH team conducted a qualitative study in 2008-2009 focusing on precariously employed racialized residents of the Black Creek area. This *Working Rough, Living Poor* report discusses salient findings from this study about systemic causes and adverse economic

and health impacts of the labour market discriminations and employment insecurity faced by racialized groups.

The focus area, Black Creek, which is a composite of four neighbourhoods located in the northwest peri-urban region of Toronto, was selected because of the high proportion of low-income racialized families living there, but also because of its rich history of community activism.

We recruited and trained 10 racialized Black Creek residents to become peer researchers for the project. During our collaborative research design meeting, our peer researchers and local partners emphasized that the study should not just focus on challenges and barriers but also document the strategies and steps that low-income racialized families are utilizing to achieve employment/income security. This gave a positive framing to the study, one that recognizes the agency of marginalized residents in Black Creek. Our key research questions were:

> **a) What kinds of strategies do racialized families develop to overcome labour market challenges and achieve income security?**
> **b) How do the challenges that racialized families face to achieve employment/income security and the strategies that they use to overcome these challenges affect their health and well-being?**

We conducted 8 focus groups with diverse groups of residents from the Black Creek area (n=105) and 3 focus groups with services providers (n=24). Popular education tools were incorporated into our focus group design that enabled participants to critically reflect on trends, systemic factors and pathways that have resulted in the economic inequalities and health deterioration they now face.

Study analysis is framed within a social determinants of health (SDOH) approach. The ISRH working group takes up the SDOH approach through a political-economic lens that argues that promoting overall health and well-being needs to go beyond just providing remedial medical treatment or changing individual behaviors to proactively addressing the full range of potentially modifiable economic and political conditions that lead to poor health outcomes and systemic health inequities. In a critical SDOH approach, health is viewed not just as a condition free of illnesses, but in terms of overall well-being and capacity to realize one's potential and live a life of dignity (Access Alliance, 2006; Raphael, 2004; Toronto Public Health, 2008).

Moreover, the study objectives are grounded on anti-oppressive intersectional framework geared at exposing the multiple and mutually reinforcing effects of different layers of discriminations and inequalities that low-income, racialized families face. Race/racialization, class and immigration status are the core intersections for the study, with gender as a cross-cutting indicator. The research location in the Black Creek area (one of the most low-income, marginalized areas of Toronto) adds geography/space as another important composite layer to the intersectional analysis.

This study has generated rich evidence about the interlocking relationships between race/racialization, the growth of insecure and unstable forms of employment, and health disparities. In doing so, it reveals deep flaws and detrimental impacts of the erosion of stable forms of employment and claw backs to social services. Results are discussed in this report in four interrelated chapters. The report begins with a chapter focused on the Black Creek area that discusses labour market and health outcomes of place-based stigmatization and marginalization faced by racialized residents in the Black Creek. The second chapter discusses the different types

of barriers and discriminations that racialized people experience in their search for stable employment as well as within their precarious jobs. The third chapter presents the health impacts of labour market discriminations and employment/income insecurity faced by racialized groups. The final chapter sheds light on different strategies and services that Black Creek residents utilize to get stable jobs, to make ends meet and to maintain health of their families; through examining the experiences and outcomes of the strategies that precariously employed racialized people utilize, the report critically assesses the effectiveness of existing services in promoting economic and health security for racialized groups. The report concludes with policy recommendations put forth by residents and service provider participants from this study and identifies policy priorities and future research directions.

Included in the chapters are telling photos and photo-narratives by photo researchers from the project's photovoice component conducted in 2007 (the full photo-book titled "Exposed: Impact of Racism and Poverty on Black Creek Residents is available from www.accessalliance.ca ).

The data analysis and writing process for this report were very collaborative, with active involvement by peer researchers. The development of the coding framework and the analysis of coded data were done jointly as a team through a series of collaborative data analysis meetings. The chapters were then written in pairs made of up one academic partner/Access Alliance staff and one peer researcher. Thus, readers may notice some variation in writing style in the different chapters. However, the core messages across all chapters are consistent in the way they coalesce to highlight adverse impacts of the persistent barriers and discriminations that racialized people face in achieving employment and income security. Though not generalizable to racialized populations overall, the study findings are salient enough to warrant urgent policy review and policy solutions to overcome the systemic employment, income and health inequalities faced by racialized groups.

## Research Principles and Methodology

CBR principles form the guiding framework for the design, execution and dissemination of this research. We understand CBR as a transformative framework of knowledge production that is:

> *grounded on principles of collaboration, community empowerment and social change in which 'community of interest' participates not as "research subjects" but as research collaborators and agents of change. In CBR, research is a means for empowering community members as partners in knowledge production (along with academic, community agency partners and other stakeholders) geared at generating evidence and mobilizing progressive change on issues that are important to the community. (Access Alliance, 2008, adapted from Minkler and Wallerstein, 2003)*

Unlike in top-down, expert-driven conventional models of research, the principles of community empowerment, collaboration and social change are central to CBR. Stakeholders (academics, policy makers and service providers) who have access to research funding and other resources act as collaborators and mediators in this transformative knowledge production in which communities that face oppression and inequalities are empowered to take a leadership role in defining and conducting research that is important to them. Community members are meaningfully involved in

the full life cycle of the research, beginning with the design phase. The underlying goal is to generate evidence, public understanding and policy changes in order to overcome root causes of inequalities and injustice faced by communities of interest.

In line with CBR principles this project began by building strong local partnerships in the Black Creek area and recruiting and training a number of racialized community residents from Black Creek to serve as peer researchers. Black Creek Community Health Centre was the key local partner for this project. Other local partners from the Black Creek area include Delta Family and Resource Centre, Griffin Centre and the local representative from Toronto Public Health. We recruited 10 Black Creek residents to become peer researchers for the project. Over the course of the project, we delivered over 300 hours of research training and mentoring to peer researchers covering a wide range of topics including research design, research methods, research ethics, conducting focus groups, note-taking, developing coding frameworks, analysis and giving presentations. All team members also received training and co-learning opportunities on collaborative and participatory methods of doing research. We developed several innovative process models for promoting equitable collaboration.

### *Collaborative research design*

The project's research question and methodology were generated through two full day-long collaborative research design (CRD) meetings. The Access Alliance research team developed an innovative CRD framework that facilitated equitable participation and creative collaboration from all members of the research team in developing the research question and methodology. Evaluation from the CRD meeting indicates that research team members felt that designing the study in collaboration led to research questions with high community relevance and potential for strong policy impact. Further, the collaborative process resulted in a shared sense of ownership and commitment to the study.

The CRD process led to a three-phase project design to meet study objectives. The first phase completed in 2007 involved using an arts-based methodology called photovoice to document impacts of poverty and racism on Black Creek residents. We trained 14 residents from the Black Creek area to become photo-researchers for this project. The photo-researchers produced over 300 photos and photo-narratives that provide nuanced picture of the everyday complexities of what it is like for low-income racialized families to live in marginalized neighborhoods. This was followed by the second phase (2008-2009) consisting of focus groups with racialized Black Creek residents and with service providers to understand systemic patterns within the barriers and discriminations that racialized groups face in achieving employment and income security; this report is based on the findings from this second phase. The final phase (to be completed by the end of 2011) involves conducting in-depth family level interviews with 10-12 racialized families to examine everyday family level implications of employment and income insecurity.

As highlighted earlier, one of the outcomes of the CRD process was to shift the research towards a positive "strength-based" lens that sought to highlight the strategies and political agency of racialized people (and not just focus on barriers and challenges). Peer researchers and community partners also emphasized the need to focus on families and not just on individuals. Thus our methodology (focus group guide, survey) and our analytical framework incorporated a strong family lens to understand family-level implications. This is also the reason why the ISRH team

decided to conduct family-level interviews (and not individual interviews) for the third phase of the project in 2011[1].

Following research design, one of our peer researchers (Zahoorinnisa) got inspired and collaborated with her daughter (Muzna) to create the following illustration to represent the focus of the project; this picture has served to ground the study in the lived experience of racialized families.

**Figure i - Picturing the link between Income Security, Race and Health**

The study received ethics approval from the Research Ethics Board at University of Toronto, Ryerson University and York University. In line with CBR principles, the ISRH team took additional steps beyond REB requirements to ensure that barriers to informed consent were proactively removed (including linguistic, literacy and cultural barriers) and multiple protocols were in place to ensure confidentiality. An "in-house" social worker was also available to meet with participants who may have experienced any mental health triggers/concerns during focus group discussions about discrimination and economic difficulties.

*Data collection methods*

A total of 8 focus groups (FGs) were conducted with different groups of racialized residents living in the Black Creek area. These groups were selected for diversity in representation by ethno-racial, regional and linguistic backgrounds of residents in the Black Creek area. A total of 105 residents attended the focus groups. Inclusion criteria for participation were based on self-identification as

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[1] Access Alliance has also brought together another interdisciplinary research team to conduct a study to investigate gendered barriers that racialized newcomer women face in getting stable employment in their fields, and economic and health impacts of precarious employment on these women. Results from this study will be available in 2012.

being from racialized background, prolonged experience of precarious employment (people who were chronically unemployed and on social assistance were excluded) and at least 1 year residency in the Black Creek area. To overcome linguistic barriers, 4 of the 8 FGs were held in the first language of the target communities and were conducted by peer researchers fluent in those languages. The composition of each focus group is listed in Table i.

One all-male focus group was conducted to make up for the low participation by men in the other focus groups. In general, it was difficult to recruit male participants from Spanish speaking and Arabic speaking communities; the male numbers for these communities in the study is low. One focus group was conducted with Canadian-born residents to ensure representation of Canadian-born counterparts.

| Table i - Composition of Focus Groups with Residents | | |
|---|---|---|
| *Focus Group* | *No. Participants by gender* | *FG language* |
| Mixed community FG | 15 (3 male; 12 female) | English |
| Hindi-Urdu speaking FG (targeting South Asian residents) | 15 (7 male; 8 female) | Hindi/Urdu |
| Spanish-speaking FG (targeting Spanish speaking residents from Latin/South America) | 16 (4 male; 12 female) | Spanish |
| Vietnamese-speaking FG (targeting Vietnamese residents) | 15 (8 male; 7 female) | Vietnamese |
| Arabic-speaking FG (targeting Arabic speaking residents from East Asia, Middle East and Africa) | 9 (all female) | Arabic |
| Black Community FG (targeting residents from African and Caribbean backgrounds) | 13 (3 male; 10 female) | English |
| Canadian-born FG | 12 (9 male; 3 female) | English |
| All-male FG | 10 (all male) | English |
| Total | 105 | |

A survey was administered at the beginning of each focus group to obtain relevant demographic information about participants and to collect basic information about their employment, income and health status. The sample size for the survey is 78. Table 1.2 summarizes some key information about the survey participants.

The majority of survey participants were women (67%). In terms of age, the group is relatively well distributed across three groups of working-age adults: 24% were thirty years of age or less; 35% between thirty-one and forty-five years; and 16% forty-six or older. More than half the research participants (60%) have at least one child under the age of eighteen living in their home. The sample is also well distributed in terms of educational attainment. While 37% have a high school diploma or less, the bulk of participants have a trade, a certificate or university education. Twenty-two percent have a trade or non-university certificate and 27% have a university degree. All participants had prolonged experience of being precariously employed. Two thirds of the study participants indicated that they are currently unemployed.

| Table ii - Survey Participant Characteristics | | |
|---|---|---|
| **Total Sample Size = 78** | **%** | **N** |
| **Sex** (Female) | 67% | 57 |
| **Age** | | |
|    30 years of age or less | 24% | 24 |
|    31 to 45 years of age | 35% | 35 |
|    46 years of age or more | 16% | 16 |
| **Children under 18 in household** | 60% | 47 |
| **Education** | | |
|    High school or less | 37% | 29 |
|    Trade and non-University certificate | 22% | 17 |
|    University graduate | 27% | 27 |
| **Years in Canada** | | |
|    Five years or less | 33% | 26 |
|    Six to 10 years | 24% | 19 |
|    More than 10 years | 29% | 23 |
|    Born in Canada or 1.5 generation | 12% | 9 |
| **Number of jobs Currently Held** | | |
|    None | 65% | 51 |
|    One job | 26% | 20 |
|    Two or more jobs | 5% | 5 |
| **Number of jobs/employers in last twelve months** | | |
|    None | 23% | 18 |
|    One job/employer | 39% | 31 |
|    Two or more jobs/employers | 28% | 22 |

The ISRH team developed an innovative focus group guide that incorporated popular education tools. The popular education framework provided multiple means and media (drawings, pre-drawn symbols, charts and discussions) for participants to share their views and experiences. It also invited participants to offer a preliminary analysis of trends and patterns they noticed emerging within responses in their FG. The following topics were covered in the FG discussions:

  a) Challenges and barriers they face in finding and keeping work, on the job, in achieving income security and in accessing programs and services.

  b) Strategies they use to find jobs (decent or precarious work), to make ends meet (day to day or month to month) and to achieve long-term income security. Participants were also asked

to divide their responses into two categories: 1) strategies that worked for them, and 2) strategies that did not work.

c) Outcomes from the strategies and services they utilize and impacts of challenges and discrimination in the labour market on their health (physical, emotional and mental), the health of their families. An innovative tool called World to Body Mapping was adapted for this component. Participants were invited to draw, write or select relevant clip arts that represent health impacts caused by employment/income insecurity and to map them on to a schematic of a body. After all focus participants had done this, participants were asked to discuss how these health issues were caused by employment/income insecurity and how, in turn, these health concerns impacted their employment/income security.

The interactive and accessible nature of the focus group guide not only allowed participants to link their experiences to the key concepts of the study but also to engage in critical reflection and analysis of pathways, trends and systemic processes related to racialized inequalities.

Following the FGs with residents, we conducted 3 FGs with service providers working in employment, settlement, health and community development sectors. Two of the three service-provider FGs were conducted with frontline staff. The third was conducted with management-level staff. During the service provider FGs, we presented preliminary findings from the FGs with residents and asked service providers to respond to these findings following a semi-structured focus group guide. A total of 14 frontline staff and 10 management staff participated in the study.

*Collaborative data analysis and writing*

Critics of CBR have noted that many CBR projects involve community members only in the research design and data collection phase and do not meaningfully involve them in data analysis, writing and knowledge exchange phases. In this study, the data analysis and writing were the most collaborative and participatory component, and peer researchers were actively involved in the analysis and writing process that led to this report. Qualitative data was coded using qualitative coding software (NVIVO) and analyzed through a collaborative data analysis process. First, the entire research team, including peer researchers, reviewed and coded the same FG transcript. They then collaboratively developed a preliminary thematic framework based on this transcript. Then different team members developed (individually or in pairs) thematic frameworks for 4 separate transcripts. The thematic frameworks from the 5 transcripts were then combined to create one comprehensive coding framework for coding of all transcripts using NVIVO. The group then broke in 4 paired teams based on thematic interest to analyze the coded data using an inductive thematic framework to identify salient themes and relationships while capturing diverse perspectives and narrative nuances. Each peer researcher was partnered with either an academic partner or an Access Alliance research staff to create the 4 paired teams. These paired teams served as sites for co-learning in which the academic partner/research staff provided mentorship in analytical rigor to the peer researchers while peer researchers oriented the academic partner/research staff with intrinsic lived experience based knowledge and analysis about the issues concerned. Each pair then presented preliminary analysis and chapter outlines to the entire team to get everyone's input and to discuss cross-cutting themes. Once the team agreed on the outline and content of each chapter and for the entire report, each pair then proceeded to write the chapters. The chapters were then compiled into the present report.

# Core Concepts for the Study

Work by the team has been guided by a common understanding of the following core concepts:

*Social determinants of health:* The World Health Organization (WHO) defines the social determinants of health (SDOH) as "the conditions in which people are born, grow, live, work and age, including the health system. These circumstances are shaped by the distribution of money, power and resources at global, national and local levels, which are themselves influenced by policy choices. The social determinants of health are mostly responsible for health inequities - the unfair and avoidable differences in health status seen within and between countries" (www.who.int). Within a SDOH framework, promoting overall health and well-being needs to go beyond just providing remedial medical treatment or changing individual behaviors to proactively addressing the full range of potentially modifiable economic and political conditions that lead to poor health outcomes and systemic health inequities.

*Precarious work:* Work that is unstable, not permanent and insecure. According to Goldring and Landolt (2009), Lewchuck et al (2008) and Vosko (2000), this type of work offers limited rights, protections and benefits to workers and allows workers little control over their schedules, types of work, work load, etc. "Precarious work has several dimensions. It gives employers flexibility but takes stable and secure work away from workers. As a result, workers may have to piece together several jobs or short contracts to make ends meet. They may have to work under the table and accept pay in cash. Although many precarious workers pay taxes, they may not qualify for Employment Insurance (EI) and other benefits" (Goldring & Landolt, 2009).

*Income insecurity:* Refers to economic conditions of irregular and unstable income that is inadequate to meet the needs required by people to live life with dignity. While "poverty" or "low-income rate" are usually measured in absolute terms by the total amount of money available to the individual, income insecurity refers to the condition of being unable to access adequate and secure flows of income that can ensure people live worry-free, healthy lives.

*Racialization and racialized groups:* Non-dominant ethno-racial communities that, through the process of racialization, experience race as a key factor in their identity (Galabuzi, 2001). Racialization is the process whereby racial categories are constructed as different and unequal in ways that lead to regressive social, economic and political impacts (Galabuzi, 2001). Statistics Canada uses the term "visible minorities," that term relates primarily to number and colour, while "racialized groups" recognizes the dynamic and complex process by which racial categories are socially produced by dominant groups in ways that entrench social inequalities.

*Neoliberalism:* refers to a political ideology grounded in the idea that the "self-regulating" property of the market (as opposed to government intervention and regulation) is the most efficient and effective basis for organizing society. Neoliberal policies and neoliberalizing processes seek to weaken or eliminate redistributive social welfare and regulatory interventions by the government in order to promote what proponents perceive as a "free-market system." Current macro-economic shifts towards a precarious/flexible labour market, weakening of unions and other institutions that protect labour standards, and cutbacks to and "marketization" of social programs are constitutive of neoliberal political processes.

# CHAPTER ONE

# NEIGHBOURHOOD, DISCRIMINATION AND HEALTH

## Systemic Barriers and Community Strengths in the Black Creek Area, Toronto

## Introduction

The Black Creek area is many things to many people. First and foremost, it is a home to its residents. But it is also a socially constituted area for particular kinds of positive and negative scrutiny, an area facing multiple economic and social challenges, and, like all areas of the city, an idea in the minds of other Torontonians. The choice of the Black Creek area for this research has been made in part because its residents represent one of the most diverse communities in Toronto. According to 2006 Census data, 70.6% of the Black Creek population self identify as a "visible minority." This is significantly higher than the percentage for the City of Toronto (47%). At the same time, residents of this area have been exposed to persistent economic marginalization, with higher than average rates of unemployment and low-income rate compared to the rest of the city.

This research attempts to capture the relationship between these two features of the Black Creek area: its racialized character and the economic insecurity of its residents. Specifically, it explores how living in a low-income, underserviced area exposed to systemic stigmatization and high incidence of racial profiling by police affects labour market outcomes and the economic well-being of residents.

There is strong evidence that place/neighbourhood and the social production of place plays a crucial role in shaping socio-economic experiences and outcomes. City level data in Toronto collected over several decades reveal unequal geographical patterning in income levels, poverty rate, economic opportunities, and service planning across different neighbourhoods and regions of Toronto (City of Toronto, 2004; Hulchansky, 2007; United Way of Greater Toronto, 2004). An emerging body of literature on the relationship between place and health show that neighbourhood features such as availability and quality of services, safety and security, social cohesion and social activism among residents, as well as resident/public perceptions about the neighbourhood have considerable impacts on the economic wellbeing and health of its residents (see Haque, et al, 2010; Osypuk & Acevedo-Garcia, 2010; Pickett & Pearl, 2000; Warr, 2006; Wilson et al., 2004). Wilson et al. (2004, p. 197) found that "perceptions about the neighbourhood in which people live are just as important for health as the neighbourhoods themselves."

Several studies have documented the impact of place-based stigmatization and discrimination on residents of marginalized neighbourhoods. According to Waquant (2007), place-based stigmatization can push residents to conceal addresses and socially disengage from their community and results in a larger process of spatial alienation through which "communal places" are transformed into "indifferent spaces." There is also disturbing evidence that racial profiling of racialized people living in "at risk" neighbourhoods in Toronto is growing in ways that have far-reaching socio-economic consequences on racialized families (Wortley and Tanner, 2004; Wood et al, 2010). At the same time, literature on what is being referred to as the "geography of opportunity" is also gaining attention. While questioning place-based inequalities and exclusions, this latter body of literature seeks to identify "critical opportunities" and health enhancing factors within a place/neighbourhood including quality housing, economic opportunities, education programs, natural environment, and community activism (Reece & Gambhir, 2008).

What is becoming increasingly clear is that localities, neighbourhoods, and communities are not neutral spaces but highly political and symbolic places through which dominant structures of power, discrimination, and inclusion/exclusion are experienced and contested most intimately

(Keene and Padilla, 2010; also see insightful work by human geographers like Wilson, et al, 2004; Pile, 1997; Swyngedouw, 1997 on this). They are also sites within which global/national level policy and macro-economic shifts (e.g. recession, outsourcing, rise of precarious forms of employment) intersect closely with people's everyday lives (Swyngedou, 1997). Neighbourhoods and community can also serve as "spaces for resistance" that promote "citizenship, democracy and freedom." (Pile, 1997:28)

This study engages with this body of literature on the role of place in shaping economic opportunities, power relations, and health to explore implications for racialized Black Creek residents. The chapter begins with a profile of the unique demographic make up of the Black Creek area. This is followed by a critical review of the politics behind existing research about the Black Creek area. It then goes on to present several important findings. The ISRH working group has found that negative public perceptions and stigma about the Black Creek area and systemic racial profiling undercut access to good, stable employment for racialized Black Creek residents. Despite this, what has also become clear through the research is that residents persistently exhibit firm political will to collectively challenge the increasing spatial marginalization of their community by strengthening their sense of community and activism.

## Profile of the Black Creek Area

For the purposes of this study, the Black Creek area comprises four neighbourhoods located in a northwest inner suburb of Toronto: Humber Summit, Humbermede, Black Creek and Glenfied-Jane Heights. The area is demarcated by Steeles Avenue in the north, Keele Street in the east, Humber River in the West and Wilson Avenue in the south, and includes residents living just south of Wilson Avenue on Falstaff Avenue. This geographic definition is consistent with the service area of the project's community agency partners in this area and reflects the understanding of the project's peer researchers. The Black creek area is also referred to as the "Jane-Finch area," particularly by media and policy makers referring to a particular intersection between Jane Street



Black Creek Area

and Finch Avenue. This latter term is often used with negative undertones associated with violence, crime and drugs. It is also worth noting that York University's main campus (Keele Campus) is located in this area.

### *Priority Neighborhood Designation*

The City of Toronto has designated the composite of four neighbourhoods in the Black Creek area (Jane-Finch area) as one of the 13 Priority Neighborhood Areas (PNA) for the City. The

designation of PNA is a highly politicized process fraught with tensions and mixed outcomes. As part of its Community Safety Plan in 2004, the City of Toronto identified the Black Creek area as one of three "at risk" areas (along with Malvern and Jamestown). Later that year, four additional areas were added to this list. Around same time, the City Council of Toronto struck the Strong Neighborhood Task Force jointly led by the City of Toronto and United Way Toronto to catalyze "neighborhood-strengthening initiatives." Informed by the United Way of Greater Toronto's *Poverty by Postal Code* report (published in 2004), the Strong Neighborhood Task Force identified several other neighborhoods/areas that were experiencing economic decline, high poverty and other problems. The neighborhoods/areas from the Community Safety Plan and Strong Neighborhoods Task Force were combined to create the 13 PNAs in Toronto.

Broadly, according to city officials, PNAs are areas with high levels of social and economic disadvantage, unemployment and low-income rate higher than city average, high proportion of "at-risk populations" (includes "visible minorities," recent immigrants and lone-parents according to the definition by the City of Toronto), poor access to services and high rates of violence and crime (City of Toronto, 2007). The designation of priority neighborhood area for the Black Creek area and the other 12 areas can be a double-edged sword; while ostensibly it is meant to boost development in the community, it may entrench negative perceptions and stigmatization about residents being somehow deficient and at risk. As noted earlier, policy makers at the City of Toronto initially cast the Black Creek area as a "priority area" primarily out concerns related to safety, violence and crime. While the re-designation of PNAs as "Strong Neighborhoods" has helped to highlight assets and positive community building strategies, safety and violence continue to be the dominant focus for many City level policy makers with regards to the Black Creek area.

### *Ethno-racial and immigrant composition of Black Creek residents*

According to 2006 Census data the largest ethno-racial groups in Black Creek are Black (20.2 %), South Asian (18.2%), Latin American (9%) and Southeast Asian (8.5%). The percentage of immigrants in the area is slightly higher than for Toronto (63% compared to 50.1%); recent immigrants (those who arrived in the last 5 years) represent 12.4% of the total population of the area. The top four regions of origin for recent immigrants include South Asia (38.8%), South America (16.4%), Western and Eastern Africa (11%), Western Central Asia and the Middle East (10.6%) and Southeast Asia (4.9%). The top five non-official languages spoken at home are Italian, Spanish, Vietnamese, Punjabi and Urdu. Table 1.1 provides an overview of the ethnic, immigrant composition in the Black Creek area compared to the City of Toronto.

| Table 1.1: Ethnic and Immigrant Composition of Black Creek compared to the City of Toronto | | | | |
|---|---|---|---|---|
| **Neighbourhood** | **% Racialized Groups** | **% Immigrants all periods** | **% Recent Imm (2001-06)** | **% Canadian Born** |
| **Humber Summit** | 54.2% | 62.6% | 14.0% | 36.4% |
| **Humbermede** | 70.1% | 63.7% | 15.9% | 34.0% |
| **Black Creek** | 78.1% | 61.8% | 12.8% | 36.4% |
| **Glenfield-Jane Heights** | 72.5% | 63.75 | 9.8% | 33.9% |
| **Total 'Black Creek' area** | **70.6%** | **63.0%** | **12.4%** | **35.0%** |
| **City of Toronto** | **47.0%** | **50.1%** | **10.8%** | **47.5%** |

*Source: 2006 Census*

## Gender and Age

On average there are more female than male residents living in the Black Creek area, with the exception of the population of children under 14 years of age, where the number of boys is slightly higher than the number of girls. It is interesting to note that compared to the City average, the Black Creek area has a significantly high number of children and youth (see Table 1.2). The percentage of children in Black Creek between the ages of 5-14 years is three times higher than the City average (15.3% compared to 5.5%). More notably, the Black Creek area has one of the highest percentages of youth from racialized backgrounds (79.9%). Lone parent families comprise 28.2% of families in the area, slightly higher than the percentage of lone parent families in the City of Toronto (20.3%).

| Table 1.2: Population by Age Cohort | | |
|---|---|---|
| **Population** | **% of Black Creek population** | **% of City of Toronto population** |
| Children (0-4 yrs) | 7.2% | 5.3% |
| Children (5 – 14 yrs) | 15.3% | 5.5% |
| Youth (15 – 24 yrs) | 15.6% | 12.7% |
| Working Age (25-64) | 49.4% | 56.8% |
| Seniors 65+ | 10.6% | 14.1% |

*Source: Census 2006*

## Education level

Educational attainment among Black Creek residents varies, but nearly a third of adult residents (29%) have not completed high school. That's compared to 13% for the City of Toronto (see Table 1.3). The percentage of residents with postsecondary education at the university level or above is almost three times lower than the City's average (13.7% vs. 36%). It is worth noting that 61.7% of residents in Black Creek with postsecondary education were educated in Canada.

| Table 1.3: Education Level | | |
|---|---|---|
| **Highest Level of Education** | **Black Creek** | **Toronto** |
| No certificate, diploma or degree | 29% | 13% |
| High school certificate or equivalent | 30% | 21% |
| Apprenticeship or trades certificate/diploma | 8% | 6% |
| College or other non-university certificate/diploma | 15% | 16% |
| University certificate or diploma below BA | 4% | 6% |
| Bachelor's Degree | 8% | 23% |
| University certificate/diploma above BA | 2% | 4% |
| Degree in medicine or optometry | 0.5% | 1% |
| Master's Degree | 3% | 8.5% |
| Doctorate | 0.2% | 0.5% |

*Source: Census 2006*

*Income Levels*

Almost one third of the population of the Black Creek area (31.9%) is low income compared to 24.4% of the population in the City of Toronto. In both the Black Creek area and in the City of Toronto racialized groups are more likely to be low income compared to other groups. Almost 40% of racialized residents of the Black Creek area are low income. This data is summarized in Table 1.4.

| Table 1.4 Low Income Rates | | |
|---|---|---|
| **Neighbourhood** | **% Low Income (before tax) of All Populations** | **% Low Income (before tax) Among Racialized groups** |
| **Humber Summit** | 23.0% | 32.2% |
| **Humbermede** | 31.0% | 37.3% |
| **Black Creek** | 38.5% | 41.7% |
| **Glenfield-Jane Heights** | 31.4% | 37.0% |
| **Total 'Black Creek' area** | **31.9%** | **37.9%** |
| **City of Toronto** | **24.4%** | **33.0%** |

*Source: 2006 Census*

## The Politics of Existing Research in Black Creek Area

During the project's initial planning phase Access Alliance staff facilitated a number of community consultations with Black Creek residents and service providers. One of the goals of these consultations was to explore residents' interest in and understanding of community-based research. The ISRH team learned that residents in general felt over-researched and that they were unable to link the numerous studies conducted in their community to positive social change.

This feeling of being over-researched likely emerges from the variety of information-gathering practices that take place in marginalized urban areas. These practices include formal academic, student, government and pharmaceutical research, but also informal studies conducted by community agencies, including needs assessments and evaluations. At the same time, a search on academic literature on the Black Creek area produced very little results. The available literature is limited to graduate thesis/dissertation studies conducted by students at York University; many of these graduate student research projects have focused on media portrayal of the Black Creek area (see for example, Hall, 2008). A number of city-level studies have included the Black Creek area as one of the case studies. Majority of research on the Black Creek area appears to be preoccupied with issues of violence, gangs, and other safety and security issues. Media coverage about the Black Creek area also has exclusively focused on violence and crime (see Rigakos et al, 2004 for a detailed historical mapping of negative media coverage about the Black Creek area).

Black Creek residents have also been the subject of a number of government commissioned research projects. Like most research on the Black Creek area, these government commissioned studies have also targeted issues related to violence, crime and drug abuse in the area. With the goal of producing policy reports, these studies are generally *crisis-driven* and have been triggered by a particular crisis situation or problematic incident. A recent example of this are the high profile

government studies following the 2007 murder of 15 year old Jordan Manners at a high school located in the Black Creek area. In response to this incident, the Toronto District School Board's School Community Safety Advisory Panel[2] (led by lawyer Julian Falconer) deepened its inquiry about school safety and produced a report titled *Final Report on School Safety* in 2007. At the same time, Ontario Premier Dalton McGuinty commissioned Honourable Roy McMurtry and Alvin Curling to conduct a province level inquiry on youth violence that led to the report titled *Review of the Roots of Youth Violence* in 2008. Another example is the Youth Safety Survey project commissioned by City of Toronto in 2001 focusing on Jane-Finch, Malvern, Regent Park and Parkdale culminating in the report titled *Speak Up: Toronto Youth Talk about Safety in Their Community* in 2002. While some of these studies have led to policy changes (for example, the elimination of the "zero tolerance" policy in schools in response to the *Final Report on School Safety*), these commissioned "crisis-driven" studies have placed a lot of scrutiny on the Black Creek area as a problem area and exacerbated the negative media coverage about the area.

Meanwhile, there is a wealth of studies on the Black Creek area produced by local agencies, especially from early 2000. These studies tend to capture the complexities of issues faced by residents as well as positive initiatives by resident groups and local agencies. Examples include the *Jane Finch Neighborhood Action Plan Report* (2004) conducted by the Griffin Centre, the *San Romanoway Revitalization Project Interim Report* (2004), *the Black Creek Community Capacity Building Project- Youth Focus Groups report* (2004), and *Street Involved Youth Issues Coalition Report* (2003). These reports, however, are considered "grey literature" (non-academic or informal) and tend to be undervalued by mainstream researchers and policy makers. In contrast, the ISRH team found valuable evidence and nuanced analysis of local issues in the Black Creek area through this body of literature. While these *community driven* studies do touch on pressing issues like violence, crime and safety facing local residents, these are examined through political-economic lens that unmask the root socio-economic causes of these issues. Recommendations from these reports go beyond just increasing security and surveillance to addressing economic marginalization and inequities faced by residents through job creation, access to quality education, youth leadership programs and other proven supports.

Recently, a small number of social science researchers from York University have begun to collaborate with local partners in the Black Creek area to conduct community-based research projects on issues related to health, mental health, settlement, and community supports and assets. The Immigrants Women's Mental Health study (a partnership between Black Creek Community Health Centre and Dr Michaela Hynie from York University) and the Assets Coming Together for Youth project (partnership between Dr Anucha Uzo from York University and dozen other partners including Jane Finch Family and Community Centre) are examples of recent community-based research in the area.

The ISRH study builds on these community driven and community-based body of research to capture the rich knowledge and political agency of Black Creek residents that uncover the systemic causes of inequalities they face.

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[2] The Ontario Human Rights Commission had filed a complaint in 2005 against the TDSB alleging that the current practices related Safe School Act had disproportionate negative impact on racialized students and students with disability. The death of Jordan Manners in 2007 pressured TDSB to establish the School Community Safety Advisory Panel in order to address safety and equity issues in schools. The Commission and TDSB finally reached a settlement in 2007 that led the Ministry of Education to introduce some sector level policy changes including eliminating the "zero tolerance" policy and improving curriculum and training around equity and safety.

# Results and Discussion

## Neighbourhood and Employment Security

### *Place-based stigma*

> *I hope the image of Black Creek improves and the government should put the efforts to improve this image because people have such a bad impression about the Black Creek Community.* (Participant, Arabic-speaking Focus Group)

There is a growing body of literature documenting the impacts of stigmatization of low-income neighbourhoods, or what is sometimes called placed-based stigma, on the well-being of residents. Existing evidence in Canada and abroad highlights that low-income neighbourhoods with a high proportion of racialized residents exist not only in physically bounded spaces of systemic marginalization but also within symbolic places onto which powerful social meanings are imposed (Keene & Padilla, 2010). In this context, residents of low-income neighbourhoods must manage and resist the impacts of place-based stigma as an additional layer of social exclusion. Findings from the present study suggests that racialized groups living in the Black Creek area regularly experience stigmatization associated with their residency in Black Creek, and these experiences of place-based stigma compromise their access to stable employment and long-term income security.

Specifically, results show that community participants were aware and critical of outsider perceptions of Black Creek residents as untrustworthy, violent, uneducated and irresponsible. Participants identified misrepresentations of the community by mainstream media as a key influence dictating how public perceptions of their community are constructed. Participants spoke to these issues with the poignancy of lived experience:

> *Being in [this] area takes so much from us and we are looked at as I don't know, people when you say I am from the Jane and Finch they are skeptical of you. They don't trust you and it is just like that.* (Participant, Black community Focus Group)

> *So if you live in the Black Creek neighbourhood first of all [they think] you are part of a low income family so you are looked at as soon as you don't have as much income you do whatever you have to, to survive. You rob, steal, or whatever and that is not really true. Just that sometimes the media portrays that.* (Participant, all-male Focus Group)

Many participants were also concerned about the large police presence and security apparatuses in their community and raised questions about links to place-based stigmatization. Study results suggest that increasing police presence and surveillance in the community does not necessarily lead to more safety for residents. Instead, it may increase the likelihood of negative encounters with police and authority and reinforce negative perceptions about the community. Many participants were apprehensive that they were under constant surveillance by local authorities. The following quote incisively captures that "panoptican" system of surveillance (in the words of Michel Foucault) may not necessarily increase sense of safety and security in a community:

> *It is insane, honestly, like I don't feel safe in the neighbourhood and I might be from it ya but I'm like damn some of the things that go on in the building and the systems and how they have cameras. What are they doing, are they watching us, are they setting us up. It's*

*the way it's designed. They got a camera in every angle, but there's no security.*
(Participant, Canadian-born FG)


### Employment opportunities in the Black Creek area

Focus group narratives provide insights about how place-based discriminations and stigmas produce negative place-dependent pathways into the labour market. Participants discussed negative stereotypes about the Black Creek area and discussed how such negative stereotypes can hinder access to stable employment and can deter local economic investments from potential investors and employers. In the words of one youth participant from Black community:

> *They (managers) are not willing to hire youth and they go through many steps of the interview when hiring youth. That is what I realize personally. Some of the managers frankly told me that they are not willing to hire youth in this area.* (Participant, Black Community FG)

Many Black Creek residents perceived that potential employers view Black Creek residents as "not well educated" and uncivilized and thus don't "value" them in the same way as other people.

> *I believe that for people in this area the employer doesn't value the employees the same way… they (employers) think is a very low educated people. Not very bright… because they live in this area and can't afford a better place of living. So they are not well educated and well civilized and so they don't value them the same as somebody living in Mississauga or somewhere else.* (Participant, all-male FG)

Several participants mentioned that this undervaluation of Black Creek residents can result in lower wages for residents. As one participant explained:

> *Because we live in this area and go and look for a job they like to pay us a little bit less. They think that we do not live in very expensive area so they could get away with that. Maybe instead of paying $30 an hour they pay $12 or $13 because I come here and they think they can get away with it because we are not well educated because we live in this area.* (Participant, all-male FG)

Service providers confirmed that Black Creek residents indeed experience a lot of place-based discrimination in the labour market due to the negative public perceptions and stigmas associated with the Black Creek area. As exemplified by the following quote from a service provider, many Black Creek residents are pressed to put a "different address" in their resumes when applying for jobs:

> *And the other problem usually they see is even the address problem. When they hear you live in Jane and Finch, Shoreham, Driftwood sometimes they become shy, I don't know why. They don't like maybe some of the employers they don't hire people from the Jane and Finch area. So you will see a lot of clients who want to put their resume a different address. I live in Scarborough, downtown while they're living here. Or they want to go you know telephone their cell phone because they, they might figure out you know the area*

*code of the phone, like you know the area. So it's kind of a stigma, Jane and Finch, you know lack of a lot of employers you know who want to hire people in this area. Those are the problems usually I see when I'm trying to help my clients.* (Participant, service provider FG – frontline)

Service providers and community participants also spoke about lack of jobs in Black Creek largely due to employers and investors reluctant to invest in the community. Service providers working in the employment sector shared their frustration in not being able to find stable employment for their clients because of the overall lack of jobs in the neighbourhood:

*Yeah the other problem we're facing in this area is we don't have a lot of employers in Jane and Finch area . . . You cannot bring employers in here actually, like in the area. But you know as I said in the area like you know I am an employment consultant and I help people, how to write their resume, cover letter all these are things that I have but if I cannot take my clients to exactly you know to, to get employment, what can I do? And we don't have a lot of job developers and employment consultants in the area actually to place our clients into specific jobs that they need to do. So those are the challenges facing me every day.* (Participant, service provider FG – frontline)

*Sometimes our clients will come up to our resource centre and they stay maybe six months, and are still looking for a job. I cannot place them, I don't have any place to take them. If I tell them like you know take your resume and go outside of your Toronto area, GTA area, they cannot drive and they don't have money to go there so something you know beyond my control.* (Participant, service provider FG – frontline)

Several participants mentioned that they are hard-pressed to find work outside of Black Creek (Mississauga, Oshawa and Milton were mentioned) and have to bear the burden of the high cost of public transportation ($12 per day or more) and the stress of commuting long hours to and from work everyday.

Participants from across all focus groups raised concerns about the growing number of "temp agencies" in the Black Creek area. They pointed out that "temp agencies" are playing a dominant role in shaping labour market entry and outcomes for many Black Creek residents, often pushing them towards precarious types of jobs:

*I went to three companies and they said no you should come through [temp] employment agency."* (Participant, all-male FG)

*Because it would benefit them [employer] if you go through [temp] agencies, it is easier for them to let you go."* (Participant, Vietnamese-speaking FG)

We also found that the portrayal of the Black Creek area as being low income and high risk can lead to other negative place-based economic penalties for residents of the Black Creek area including being charged high insurance costs for their homes, cars, etc. Participants who had moved to Black Creek from other parts of Toronto were surprised to find that insurance premiums can be three times higher in the Black Creek area.

Study results suggest that negative stereotypes and stigma about a place can have serious negative impacts on labour market and economic conditions for residents of that place. Several studies have documented the spatial patterning of economic inequalities in Toronto. Ongoing data monitoring by the City of Toronto reveals persistent and growing geographical inequalities across the 140 neighbourhoods of Toronto in spite of multiple efforts to invest in low-income, marginalized neighbourhoods. In 2003, the United Way of Greater Toronto conducted a comprehensive review of the change in neighbourhood level poverty in Toronto from 1981 to 2001 and found growing number of "high poverty neighbourhoods" in inner suburb areas (including Black Creek area) and in core areas of Toronto. Hulchansky (2007) and colleagues at the Centre for Urban and Community Studies conducted a thorough historical examination of Census data (from 1970-2000) to reveal worsening economic polarization in Toronto that split the city into three distinct spatial zones, which he labelled City #1, City #2 and City #3. While residents of City#1 have been enjoying substantial rise in income levels, the residents of the other two "cities" have been subjected to persistent decline in income levels over the last three decades with 34% decline for residents of City#3 (Black Creek area included) compared to Toronto CMA average.

The reports by United Way Toronto (2004) and Hulchansky (2007) highlight that the marginalized areas/neighbourhoods experiencing economic decline (the "high poverty neighbourhoods" or "City#3") are the ones that have high proportion of racialized and immigrant population. These studies point to the salient role that neighbourhood/place plays in shaping economic outcomes. The results from these city level studies also expose the racialized dimensions of the spatial patterning of inequality in Toronto.

### The case of racialized youth in the Black Creek area

During focus group discussions on the challenges and barriers to achieving income security, some participants, particularly those from the Canadian-born focus group, drew links between high incidences of discrimination and racial profiling of youth in the Black Creek area and their inability to find stable employment. Community members exposed the mutually reinforcing cycle



**Photo-Narrative 1.1. Normal Speed Traps**
The police set up speed traps where cars are most likely to be speeding. This is regular for police while crime is being committed across the next street. Real crimes go unsolved and criminals get away with crime while police idle their time trapping normal hard working people into the system. What can we do about it? Nothing!
Photo-researcher: Ann-Marie

in this relationship: systemic racial profiling produces high rates of criminalization of racialized youth from an early age, which in turn results in systemic displacement of these youth from formal labour market thereby pushing them towards high-risk activities. The following quote by a frontline service provider sheds light on this vicious cycle and locates the root cause to the discriminatory and disrespectful experiences that youth of colour face during their initial experiences in the labour market:

> *That a lot of young Black males when they're when they first initially, maybe when they're 15 16 and they go out and they attempt to get a job maybe at No Frills or some sort of grocery store, and they feel sort of used maybe at times, abused at times, and so that's discouraging. And so then when people take away their pride or you take away their esteem that people still need to make money but they don't want to do it at the at the expense of constantly being disrespected in the workplace. So you're going to participate in alternative economies. So you know you could start to participate in drugs, dealing drugs, that sort of thing and we know that doesn't work because that will lead to other consequences.* (Participant, service provider FG – frontline)

Several participants linked the problem to the high incidence of racial profiling of racialized people by police, particularly racialized youth. As one Black youth participant highlighted:

> *Police are always targeting. We had a basketball tournament in my place on the street in a little basketball court. The police came and they didn't know about it. They came and drove up and next thing you know there are 4 more police cars and they all just stand there watching guys having a basketball tournament. We aren't doing nothing – just BBQing and having a basketball tournament. And targeting us you know what I mean. Someone will get a call in the community and say this happened and next thing you know they are sending the police like 5, 10 people out just to catch one person and bring in for a line up and have someone come and identify them. So really and truly you may not even be involved and you can get caught up. (Participant from Canadian-born focus group)*

Another participant shared an unpleasant experience of being stopped by police:

> *When we get stopped by police officers, all the human rights is out the window. It is a different story Community policing? The cops are supposed to reflect the community they work in. I feel like we have hired oppressors, the dictators in the neighbourhoods. All that ya, the way it is just the interaction with the cops. Just the other day the cops I got pulled over and they were like oh, do you have anything in your car that you shouldn't have in your car? What kind of question is that I told them what kind of question is that? Ya, I have a couple of guns in my car. I would love to express my mind but I feel like they are going to pull a Rodney King on me next time.* (Participant, all-male FG)

Participants noted that once you get a criminal record then it can be extremely difficult to enter the mainstream labour market. Discussions from participants indicate that there is a long history of systemic racial profiling and criminalization of racialized youth in the Black Creek area. The inability to find decent work due to a criminal record in turn forces many racialized youth into a lifetime of precarious work, "illegal" work and income insecurity. Several participants provided rich insights on this issue that can only come from people who have lived experiences with or have intimately witnessed these regressive social processes:

*I have a lot of friends that went through this, and it fills every category. Once you do get a criminal record when you are 18 you are not getting a job anywhere and what does that push you to do? ...It happens things happen, but what I am just concerned about is why do you have to be pushed away from finding a decent job? Ya you were young, you were dumb and you committed a crime, alright, that was the past you know. But it is...okay, go to jail whatever for a month, for a year but you can't tell nobody that you can't get a decent job. That is just taking your life you know right out of you. That is just wrong. You can punish them for doing whatever but I just believe that is one thing that should change.* (Participant, Canadian-born FG)

While tensions between racialized groups and the criminal justice system exist as part of a long history of racism that extends beyond the borders of the Black Creek area to all of Canada, this report focuses on the role neighbourhoods play in the criminalization of racialized youth. Existing literature reveals that the persistence of over-policing in racialized neighbourhoods contributes to a relationship of mistrust between community and police, the disproportionate incarceration of racialized youth in prisons[3] and tension between racialized and non-racialized groups living in the same neighbourhood.

Studies by Wortley and Tanner (2004) and by Tanovich (2006) have been instrumental in exposing the severity of racial profiling in Canada. A survey conducted with a random sample of 3,393 Toronto high school students found that Black youth who did not engage in activity that was likely to attract police attention were nevertheless four times more likely to report being stopped and six times more likely to report being searched within a two-year period than similarly situated White students (see *The Colour of Justice: Policing Race in Canada* by Tanovich, 2006 for a critical exposition of this issue). Drawing on their study of racial profiling in Cincinnati, US, Macdonald et al (2007, p.2569) argue that in such conditions police serve as "agents of social control targeting 'minorities' to maintain race and class control and protect the hegemonic interests of White society". Galabuzi (2006) has brought attention to the disproportionately high rates of incarceration and negative experience with the criminal justice for racialized groups in Ontario and across Canada.

Participants highlighted that there is an urgent need to break this vicious cycle. Service providers shared some innovative programs to enable youth with criminal records to re-enter the labour market. However, participants stressed that increasing police presence and surveillance in the name of promoting safety only fuels this vicious cycle. Rather, the solutions lie in retraining police and authority against racial profiling and discriminatory practices, increasing employment opportunities and economic investments in the community, and promoting education and leadership among youth and children in the community.


## Community Strength and Activism in the Black Creek area

While participants were aware of the many problems in their community, most had positive views about the Black Creek area. This positive sense of community appears to be a source of strength

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[3] According to the Ontario Commission on Systemic Racism in the Criminal Justice Systems, while Blacks comprise of 3% of Ontario's population in 1995, they represented 15% of people in prison; Black imprisonment increased 204% between 1986 and 1992 (Galabuzi, 2006).

for residents. Many participants appear to be actively involved in local community-building activities. In contrast to the negative media representation and general perceptions of the community, Black Creek residents view themselves as hard working and positive people and take pride in being residents of this community:

*Being in that area takes so much from us and we are looked at as I don't know, people when you say I am from the Jane and Finch they are skeptical of you. They don't trust you and it is just like that. I like to be there because that is my identity and that is where I belong. I can't go live downtown because I don't feel that place.* (Participant, all-male FG)

*We who live in this area it is not what they put it out to be. You walk around this area and people are taking their kids to day care, people rushing off to the TTC to go get to work. May not be the best job, but whatever the case may be. It is honest, hardworking people, so sometimes when they talk, it is all crap. I am not saying there are no incidents and so on, but it is not the proportion that they actually highlight on the media. I know it is crap.* (Participant, all-male FG)



**Photo-narrative 1.2. Ethnicity in Harmony**
The paintings basically represent all the different types of people who live in that building and neighbourhood. People who are from different ethnic backgrounds, living together in one loving neighbourhood. Basically someone saw the multiculturalism in the neighbourhood and decided to gather a group of people to make the painting and make it visible for everyone.
Photo-researcher: Dorigen

Black Creek community is known for its rich history of citizen led activism. The strong sense of community activism contributes to social cohesion and collaboration in spite of the many barriers and divisive forces that impact Black creek residents. Researchers examining "geographies of opportunities" show that community activism can help to buffer stressors resulting from place-based stigmatization (Osypuk, 2010). Results from this present study indicate that many participants were supportive of or actively involved in community activism geared at contesting systemic inequalities. One participant highlighted in the following way the power of collective activism to bring positive change including reforming Ontario Works and temp agencies:

*We need to come together as a community, Black Creek community, come together and do something for ourselves. If we were to all boycott the temp agencies everybody, get everyone to say forget temp agencies. Boycott now and we all lined up at Ontario Works they would do something like this, no problem. Because they don't want everybody on*

*Ontario Works like that. They don't want that many people on Ontario Works when there are jobs out there we could be doing. But we can organize ourselves in the way where we can boycott a temp agency."* (Participant, Canadian-born FG)

Overall, data from this study underline a critical awareness among Black Creek residents that allows them to contextualize their reality in larger systems of oppression that drive the process of stigmatization. Many participants demonstrate a unique ability to locate and therefore understand the root causes of the place-based stigma and marginalization. As a result, residents seem able to resist internalizing negative projections of the community. Instead, Black Creek residents exhibit a firm political will to collectively challenge the increasing spatial marginalization of Black Creek by strengthening their sense of community. Participants spoke often of the need to come together to bring positive change:

*We fight against each other like that because we don't have time to come together. They don't give us no time and no space to do it. I mean go to work and got to work and you got to go do this and that and go to school. They make life so separate and they make individuals out of everybody. And it is good to be an individual but at the same time you need to come together too at some point if you want to make a change and if you want to make a difference.* (Participant, Canadian-born FG)

Residents experience the Black Creek area as a politicized sites of domination, discrimination and exclusion but also as "spaces for resistance" and civic engagement.

## Conclusion

Study findings indicate that negative stereotypes and stigma about Black Creek, often reinforced by media, have adverse impacts on labour market and economic conditions of Black Creek and its residents. This place-based discrimination adds to and exacerbates the multiple discriminations and barriers that racialized residents of Black Creek face in the labour market. Results point to the following interrelated place-based barriers to stable employment: 1) employers may not hire residents living in this stigmatized neighbourhood or will treat Black Creek residents differently; and 2) the absence of decent employers located in Black Creek combined with the proliferation of temporary employment agencies in the area drive racialized residents onto a long-term course of precarious employment and income insecurity. In turn, the high levels of unemployment, poverty and economic disinvestment in Black Creek result in negative community health impacts, including a decrease in safety and security.

Participants stress that increasing police presence and surveillance (security cameras, security guards in the malls, traffic surveillance) contributes minimally to increasing safety in the community. They point out that a lack of good jobs in the community and discrimination in the labour market are the key factors that push people into alternative and illegal income-generating activities to make ends meet. Participants were very concerned about the systemic racial profiling and criminalization of racialized youth in Black Creek. Study evidence highlights that such practices have long-term negative impacts on career and income security of racialized youth and their families.

The message from the participants is clear: they see a lot of police in Black Creek but not enough jobs; they feel the impact of stigma in the job market; they see the damage that multiple forms of oppression cause in the lives of young residents; they have complex insights into the relationship between this oppression and participation in criminal activity. These insights could become an important contribution in shaping policy



**Photo-narrative 1.3. Jane and Finch**
"This sign is high up which means that we will rise above. The wires show that nothing can hold us down. When other people see this sign they get scared. The sign tells us where we are from – we are proud of where we are from. This sign tells people where they are going. The sign leads to new places. This sign represents my community. It is the entrance to my community. We live in a strong community, even though we don't have as much money as other neighborhoods, we are still strong."
*-Photo-researcher: Safy Abouzaid*

# CHAPTER TWO

# PRECARIOUS WORK, INCOME INSECURITY, AND RACIALIZATION

## Racialized Black Creek Residents' Struggle to Find and Keep Stable Employment

## Introduction

During the last two decades, the nature of work and the structure of labour markets have changed dramatically in Canada and globally. Changes in technology, government regulations and international trade and financial systems have had a big impact on labour market conditions and in workplace organization. The number of both high- and low-wage occupations has grown, while middle-income jobs are on the decline, and full-time and permanent jobs are difficult to find and keep (Cranford et al, 2003; Evans and Gibbs, 2009; Quinlan, et al, 2001; Silver et al, 2005; Statistics Canada, 2005; Vosko, 2000). Temporary, part-time, contract and own-account self-employment currently comprise almost 40% of the workforce in Canada, compared to about 30% in 1980s (Cranford et al, 2003). In line with neoliberalism, government regulation of labour markets has weakened, while budget cuts have made employment standards enforcement against violations difficult and deepened claw backs to social safety nets and social welfare programs (Benach et al, 2007; Goldring & Landolt, 2009a; Peck & Tickell, 2002; Vosko, 1998; Workers Action Centre, 2007). Employment data in Canada also reveal that a large proportion of new jobs that are being created during current recession period are part-time jobs, while the jobs being lost are usually full-time, permanent types of jobs (Yalnizyan, 2009).

These global and local structural and policy changes have helped to create vulnerable workers who are employed in precarious "flexible" jobs and experience life-long employment insecurity (Harvey, 1989; Peck and Tickell, 2002). As a result, the new economy can pose a challenge to working families (Goldring & Landolt, 2009b). Employment insecurity results when worker perceptions and concrete experiences of work are marred by uncertainty about finding work and/or its terms and conditions (Kalleberg, 2008; Lewchuk, De Wolff, & King, 2007).

A growing proportion of employers have reduced their overall labour costs and introduced flexibility into production schedules using two types of strategies. First, employers seek to evade labour standards regulations by creating legal distance between themselves and employees, which is done through subcontracting, temp work and the misclassification of workers as self-employed (Bernhardt, Boushey, Dresser, & Tilly, 2008; Workers Action Centre, 2007). Second, employers violate laws regulating work by paying people off the books, through wage theft, by failing to comply with safety regulations, etc (See excellent account against "wage theft" by Workers Action Centre, 2007). In this context, employment insecurity becomes the "new normal," not simply because there are fewer jobs but also because of the way work is organized.

In Canada the bulk of research on precarious work has been based on the analysis of secondary data sources generated by Statistics Canada, such as the Labour Force Survey (LFS) and the Survey of Labour and Income Dynamics (SLID). Most researchers working with these data fail to consider immigrant status, modes of immigrant entry (refugee, sponsorship, etc.), country of origin, and race. As a result it has been difficult to establish the differentiated patterns of work precarization and the impacts of labour market restructuring on different populations. Studies by Cranford & Vosko (2006), Vosko & Zukewich (2006), and Block and Galabuzi (2011) have begun to unmask the gendered and racialized nature of precarious employment in Canada. At the same time, researchers at Toronto Immigrant Employment Data Initiative (TIEDI; see www.yorku.ca/tiedi) have analyzed data from Longitudinal Survey of Immigrants to Canada (LSIC) to produce rich evidence (disaggregated by race, gender, immigration status/category, length of stay etc) about labour market barriers faced by immigrants including barriers to foreign

credential recognition, access to full-time employment, variations in regulated vs. non-regulated professions, and experiences of discrimination in the workplace.

Also absent in the literature are worker responses to precarization and the impact of precarious work and income insecurity on household dynamics, family health and community health. A second wave of scholarship has begun to address these gaps through primary field research with a focus on the application of survey questionnaires designed to address predictors of precarious work (Goldring & Landolt, 2009a) and its impacts on worker health (Lewchuk, deWolff, King, & Polanyi, 2006).

The ISRH research project uses a qualitative lens to look at precarious work and employment insecurity. It fills a significant conceptual void in research because it offers an interpretative analysis of precarious work and employment insecurity that captures the meanings workers give to these experiences. Further, it closely examines the role of race/racialization in the social production of precarious work and employment insecurity. The findings of this research can be summed up by the following analytical statements:

- Black creek workers interviewed for this project constitute part of the growing population of working poor; they circulate in and out of precarious jobs and their work and family lives are filled with livelihood insecurities.
- The labour market in which Black Creek residents are embedded is characterized by a shortage of job opportunities, an erosion of full-time employment and an over-representation of temp agency work (also discussed in Chapter One).
- The search for work is "a gendered family affair" in which men and women workers' decisions about taking jobs, organizing work and job readiness schedules require juggling home and work responsibilities. In a context of employment/income insecurity, the absence of quality and affordable childcare becomes a major obstacle with detrimental effects for all members of the family unit.
- Racialization and discrimination are systemic obstacles that influence Black Creek residents search for stable employment. Discrimination takes many forms including islamophobia, exclusion based on language and accent, and ageism.
- Time in Canada is a significant source of variation in the kinds of challenges and obstacles faced by Black Creek immigrant residents.

## Results and Discussion

### Everyday Experiences of Precarious Work and Income Insecurity

The study results below profile the research participant population with regards to their employment trajectories, human capital and income security. What becomes clear is that racialized residents maintain fairly regular employment but remain in relative poverty due to precarity of the employment, low levels of pay and dependent expenses. They face numerous systemic barriers and discriminations that prevent them from getting stable forms of employment. Consequently, they experience chronic income insecurity such that it undermines their ability to escape personal and economic contingencies—they are less likely to weather financial storms. ISRH research participants are not without collective resources and human capital. In fact a number of them have attended university. This fact challenges established thinking on who constitutes the working poor.

### Work and income security profile of focus group participants

As noted earlier, 63% of the study participants had a trade certificate or university diploma. The work profile of focus group participants suggests a situation of working poverty in the Black Creek area. In the twelve months preceding the study, 39% had had one employer and 28% had had two or more jobs and/or employers. Sixty-five percent of research participants were unemployed at the time of the study with many of them laid off very recently in the wake of recession. Of the 31% who were currently employed over half (56%) described their job as non-permanent; 23 individuals were working casual or on-call jobs, 17 were working temporary, short-term or contract jobs, and one person was working a seasonal job. Research participants therefore have a tenuous relationship to work. Their employment status is very precarious marred by temporary and on-call types of jobs, juggling multiple jobs and frequent lay offs. Employment insecurity and precarious work correlates with income insecurity. Not surprisingly the income security profile of focus group participants is equally troubling, with 30% saying they had made use of a food bank in the twelve months before the study. The great majority (79%) used more than 30% of their income for rent.

### The labour market in the Black Creek area

Recognizing the importance of local narratives of larger, global trends in the precarization of work, the team analyzed focus group participant characterizations of the kinds of jobs they believe are available to Black Creek residents. Three features stand out in their discussions: first, the general absence or shortage of job opportunities and concomitant erosion of full-time employment; second, an over-representation of temp agency work in their neighbourhood; and, third, the gendered nature of the labour market. Each of these features is discussed below. Based on her photo of the "Jobs Van," one photo-researcher in the project reflected about employment issues in the community in the following photo narrative:



**Photo-narrative 2.1. Searching**
"It takes a village to raise a child", and seeing two mothers supporting each other and just being out on a stroll it was just like a nice day. You know, but also having the truck there brought to my attention the reality falls back on providing for our children and stuff. If they're walking to the van for employment it goes back to our revolving circle as well. There's no jobs, you know, lack of education and stuff as well so I wonder if they went to the van, if they are successful. Are these mothers working right now? Are they employed? Are these kids ok?"
-Photo-researcher: Celena

Black Creek workers and service providers have seen full-time and better-paid jobs disappear as a result of labour market restructuring. According to service providers, the recession, in tandem with a shrinking labour market, is generating significant layoffs. Low-end manufacturing jobs are becoming scant. These are precisely the jobs previously held by many Black Creek workers. One participant in the service provider (management) focus group also challenged the "myth of full

employment" that frames discussions about layoffs and retraining of laid-off workers. As s/he explained:

> *...Full employment never ends up happening in a capitalist system. And so...that's part of the problem of our society saying well if we would just educate these people and train these people. Well there aren't enough jobs to go around, that's how the system works. And so we need to end up treating people that can't get employed with due respect and create some income security for them.* (Participant, service provider FG – management)

In the perennial absence of full employment this participant called for a focus on income security and treating people with dignity.

The loss of full-time, stable work has pushed Black Creek workers into temporary agency contracts. Echoing the experience of many research participants, one individual described how he lost his job to restructuring and was forced to turn to a temporary employment agency.

> *My job was a general labour machine operator and then there were mergers in the company...some positions were [made] redundant so you have to go to the [temp] agency. And you go to the agency...Sometimes there is jobs, sometimes 2 days a week, sometimes 1 day a week so therefore it is not stable and not certain as to next day what is going to be happening.* (Participant, all-male FG)

Service providers confirm that they too have seen both an increase in the number of temporary agencies setting up in the Black Creek area and in the proportion of their clients who, having lost a full-time job, turn to these agencies for work. Every focus group discussion flagged the profoundly negative impact of temporary employment agencies on participants' prospects for finding decent work and achieving income security. A woman in the Spanish-speaking focus group described the instability of temp jobs.

> *Sometimes it is weeks without work and so our debt increases and increases and I try to see how to avoid spending... my work is on-call ... the 4 or 5 jobs that I have I try not to have them be on the same day... in one day I might get calls from like 3 hotels and I feel like the one I choose will give me 8 hours and then they give me 4 and the one I should have gone to gave 8 hours. So it's something that frustrates you.* (Participant, Spanish-speaking FG)

A service provider recounted a similar pattern of uncertain employment and wasted time.

> *We hear so many horror stories from our clients...from uh these temp agencies. Clients sit in the office with their...hard hat and boots and whatever and just sit there until a job actually comes in. So they waste...the whole day waiting there, right and there's no job. But every day they have to do that because just in case a job comes in. ...They do realize that temp agencies, the majority of them just do not work, right?* (Participant, service provider FG –frontline)

The gendered nature of labour market opportunities is a third pattern identified by focus group participants. The general difficulty of securing any kind of employment prompted men in our focus groups to complain about being shut out of service-sector jobs. One respondent from the all-male focus group commented:

*Even though discrimination of man and woman is not shown explicitly in advertisement…If you think about it…some kind of beginner job, go to be a waitress in a restaurant privilege goes to girls. If you are going to a reception, the privilege goes to a girl; admin assist goes to girl…and so many other positions in my experience as well as knowledge that have been occupied and women are given more privilege.* (Participant, all-male FG)

In like fashion women complained about being shut out of manual labour. As one participant from the Hindi/Urdu-speaking focus group commented, "*Females are told that some jobs are meant for men.*" Job scarcity produces gendered conflicts and competition among workers.

### *Family juggling acts*

The search for employment is typically conceptualized as an encounter between a single worker and the jobs offered by the labour market. This research shows that job search and employment-related decision making is highly gendered and often occurs within a family unit that includes women, men and children. In this context a significant job-search challenge faced by Black Creek's low-income working families is the absence of decent and affordable childcare. Women in particular juggle home and childcare responsibilities with their job search and work schedules. A participant in the Spanish-speaking focus group described the challenge as follows:

> *…us women [we] have limits regarding our schedules because the husband starts at six and the woman is arriving at three or four. I send my daughters to school and if I don't have anyone to send them with then there are times that the youngest only attends twice a week and I have to find someone to leave her with on the days she doesn't go to school I have to find someone to take care of her for less money. But I have to be sure about who I leave her with. These are limits that one has in order to be able to work.* (Participant, Spanish-speaking FG)

Family responsibilities also limit women's ability to access employment programs. As another participant from the Spanish-speaking focus group explained:

> *When you go to community centres for a resume workshop and you don't have somewhere to leave the children you take them with you and they tell you that's not allowed.* (Participant, Spanish-speaking FG)

Confirming that labour market entry is a family affair men in our focus groups were also aware of the gendered nature of the obstacles faced by working families. A participant in the all-male focus group explained:

> *Well, childcare and all of that when keeping a job. You have to actually structure your life or your work schedule for the week…If you don't have somebody to take care of your small kids then you can't go to work. There is a conflict right there – you want to work but don't have the necessary childcare.* (Participant, all-male FG)

Income insecurity and childcare responsibility are important barriers that hamper both the search for work by families and the entry of men, women and youth into the labour market.

## Challenges and Obstacles to Finding Stable Employment

During focus group discussion, participants identified numerous systemic barriers to finding stable employment that they want. This is summarized in Table 2.1.

| Table 2.1. Types of Systemic Barriers to Employment Security Faced by Racialized People | | |
|---|---|---|
| **Systemic Context** | **Type of Barrier/Challenge** | **List of Barriers/Challenges** |
| Barriers related to macro-economic shifts | Barriers due to growing precariousness and instability of the Canadian/global labour market | Systemic reduction in full-time stable jobs with benefits and shift to part-time, temporary, contract jobs with little or no benefits; increase in temp agencies; recession; outsourcing |
| | Barriers due to lack of or weak implementation of employment rights and protections | Lack of or clawback of extended benefits (extended health insurance, vacation time, sick leave, parental leave, etc.); weak health and safety protocols (unsafe working conditions, lack of proper attire); lack of training and professional development; lack of protection against exploitation and workplace discrimination by employers |
| Barriers related to discrimination/exclusion | Racialized discrimination | Discrimination based on socially constructed ethno-racial factors including race, ethnicity, religion, country of origin, first language, accent, cultural affiliation of person's name |
| | Gender-based discrimination | Women barred from getting certain jobs; women more likely to get bad shifts and lower pay rates |
| | Discrimination, exclusions and xenophobia faced by immigrants | Non-recognition of foreign degrees and foreign work experience; difficulty getting accreditation; barriers in getting Canadian education/experience; non-recognition of Canadian education/experience; not having strong social networks; negative presumptions about recent immigrants being 'ignorant'; newcomers more likely to get bad shifts and lower rates of pay |
| | Discrimination based on immigration status | Non-status taken advantage of and exploited by employers |
| | Discrimination based on language | People with low English fluency more likely to get bad jobs and low pay; |
| | Place-based discrimination | Discrimination due to living in Black Creek; increased insurance costs just because of Black Creek address; |
| | Age-based discrimination | Older people and older immigrants less likely to get jobs |
| Systemic barriers related to service access/quality | Lack of accessible and affordable services | Lack of accessible/affordable childcare; lack of accessible/affordable education and training programs; |
| | Transportation barriers | Lack of good public transportation; length of travel from home to work; rising cost of transportation |
| | Lack of access to information | Information gaps about where and how to find good, stable jobs; about how to build long-term employment security; how to file complaints or counter discrimination in the labour market; about workplace safety |
| | Limitations and structures of disincentives in welfare and other support services | Multiple disincentives in Employment Insurance, Ontario Works and other governmental supports that prevent recipients from pursuing training and re-entering labour market |

Based on our analysis three points of entry can be distinguished for analyzing the challenges and obstacles faced by Black Creek residents in their search for employment security. A first point of entry is racialization and race-based discrimination. These factors are cross-cutting systemic barriers that overdetermine the character and outcome of job searches. These markers are typically negative (e.g. the assumption that a racialized worker is best suited for menial labour), but can also be positive (e.g. the assumption that a racialized worker is well-suited to service work). In both cases, racialization is problematic because the power to define a person's abilities and aptitudes is predetermined and systemic and well beyond that person's or group's control (Anderson, 1991). Race-based discrimination goes hand in hand with racialization to produce and hegemonically maintain racialized inequalities. Race-based discrimination can be institutional, where fairly stable structures systematically exclude racialized groups (e.g., though racialized groups comprise almost 20% of the population, only 3% of management-level jobs in Canada are held by racialized groups), or direct/informal and thus reflected in attitudes and behaviors. Institutional and direct dynamics of discrimination typically complement and compound each other (Castles & Miller, 2009; Galabuzi, 2006; Nazroo, 2003).

A second point of entry is age and age-based discrimination. Younger and older workers discussed their perception that they were being passed up or squeezed out of jobs because of their age. The focus here is on older workers, as the experience of youth is taken up in the chapter on the Black Creek area (Chapter One), since youth experiences are much more closely linked to the negative racialization of the Black Creek community more broadly.

A third point of entry is the immigration trajectory and time spent in Canada. Time in Canada impacts research participants' job search experiences. It is generally considered an important dimension of labour market incorporation outcomes. This study suggests that the challenges faced by and the priorities established by research participants reflect noteworthy differences based on time spent in Canada and on their immigration trajectory. In particular, experiences of racialization and systemic discrimination play out differently across three populations: recently arrived immigrants, who have mostly entered Canada as permanent residents through the point system; more settled immigrants, who have lived in Canada around ten years or longer; and children of immigrants. The differentiated experiences between these groups are important when considering the service delivery and policy implications of this research.

### *Racialized discrimination*

Focus group participants talked about how attributes such as their skin colour, language and/or accent, birthplace, cultural and religious practices negatively impacted their job search. They talked about islamophobia, physical markers of 'difference' and language-based discrimination and argued that these employer-driven forms of racialization and discrimination significantly restrained their employment opportunities and made their entry into the labour market considerably more difficult. We take up each of these experiences in turn.

According to the all-female Arabic-speaking focus group, Black Creek's Muslim residents are subject to an explicit form of discrimination tied to their religious practices. Islamophobia hampers their search for stable employment they want. As three participants in the focus group mentioned, *"If you have an Arabic name, then you might not be able to find a job."* The women reported labour market discrimination and unequal employment opportunities based almost entirely on the

wearing of hijab, "t*he main problem is the racism we face against the hijab. It affects finding a job or sustaining it.*" Another participant recounted how a friend had lost her job because she wore the head scarf:

> *My friend is a dentist; she could not work here as a dentist so she worked as a dentist hygienist. The main problem she would face is the working with the hijab, her look. At the end she worked somewhere but not in her specialty or education."* (Participant, Arabic-speaking FG)

Discussions among Black and Hispanic focus group participants point to another pattern of discrimination based on their physical appearance. Participants from the Black community focus group talked about being passed over for jobs, having negative job interview experiences and being slotted into particularly heavy and menial tasks on the job because of their race. One participant talked about an employer's reaction to the fact that she was black:

> *When I was sitting there waiting for an interview she spoke to me on the phone, she doesn't know what, what, what background I was from. When I went to the interview, the guy at the front said, "No that cannot be the person that came for the interview". I was sitting right there.* (Participant, Black community FG)

Latin American participants felt that there was an unspoken assumption among employers about Hispanics' suitability for particular kinds of low-level work. One participant exclaimed, "*there are people [employers] who think we are less than others.*" A second-generation Latina commented on the assumptions people make about her as a woman based on her physical appearance, as distinct from her Canadian or "white" way of speaking.

Language is an additional source of discrimination in the labour market. Although having an accent does not necessarily reflect an individual's capabilities in English, participants reported being treated unequally based on the way they speak English. A participant from the Hindi/Urdu-speaking focus group explained:

> *So the type of things we are talking about now the important aspect is that our accent in English is the first step of contact [with employers]. For instance if you give an interview over the phone or make your first contact with the employer. When the employer notices this is the type of English you are speaking …as immigrants our different English accent is the first hurdle in securing a job and at the onset itself you take up secondary preference in the employer's mind.* (Participant, Hindi/Urdu-speaking FG)

To summarize, focus groups with Black Creek residents reveal the multiple forms of racialized discrimination that hinders workers' entry into the labour market. Individuals are passed up for interviews on the phone or on site because they wear hijab, speak with an accent, and is Black or Latina/o. We contend that these experiences reflect the systemic production of racialized employment insecurity and the perception and experiences that mire racialized workers' lives in uncertainties about finding work and/or its terms and conditions.

### Age-based discrimination

A second barrier to finding work is age-based discrimination. Both youth and older workers perceived that they were being shut out of the labour market because of their age. Here we focus on the situation of older workers. Older research participants were willing to work longer hours or accept bad jobs to make ends meet but they felt that employers were hesitant to hire them. A participant in the Arabic-speaking focus group commented:

> *As for elderly: finding a job? There is no evaluation for their work. Sometimes elderly has to work since they do not have others to help them and fund them. Marginalization of elderly...at work. They can face a lot of difficulty in finding a job.* (Participant, Arabic-speaking FG)

This issue was echoed in discussions of the all-male focus group. One participant in particular commented:

> *Age I would say because when they are older employees and they keep them at a certain salary, income bracket it becomes a little more costly compared to the new students, new people they hire. That is another reason that they discriminate against older employees.* (Participant, All-male FG)

Aware of the discrimination they were facing, some workers felt they had no other option than to lie about their age in order to find and secure a job.

> *Even some of the dates you've got to change too because you don't want to put dates, you don't want them to think you're older, so you want to appear younger. You put a different date because you have to lie about it to get a job.* (Participant, Black community FG)

Another participant in the Black community focus group recounted what she had seen:

> *We headed towards 40 and you know we have bills to pay. ...where I'm working now, this lady came to me the other day, you know she is like 45 plus...for how many years and can't find a job. And everywhere it goes she is told, "It's too hard for your age". You understand...she's frustrated, she doesn't know what to do, and the bills is mounting up.* (Participant, Black community FG)

What is particularly troubling about age-based discrimination is that the bulk of participants who perceived that they were being shut-out of the labour market because of their age were only in their forties.

### Time in Canada and immigrant experiences

Research on the employment experiences of Toronto immigrants suggests that early work experiences are a significant determinant of employment outcomes in the long term. Immigrants whose early work experience in Canada is characterized by precarious jobs are more likely to remain in precarious work, regardless of education and time in Canada (Goldring & Landolt, 2009a). Immigrant labour market outcomes are path dependent where early work experience sets

workers on a given track toward decent or precarious work. It is very difficult to "jump tracks" along the way. In this light, our analysis of job search challenges based on research participants' time in Canada situates the employment experiences of long-time Black Creek residents, specifically of immigrants who've been in Canada longer and of the children of immigrants, as a harbinger of the labour market trajectory on which recent immigrants, the so-called "best and brightest of the point system" are being set.

*Recent Immigrants*

The non-recognition of foreign credentials and work experience was identified by participants as one of the most salient barriers to their successful integration into the labour market, as well as a barrier to their immediate and long-term financial security. Participants not only felt misled by an immigration process that advertised a need for professionals in Canada, but also humiliated by the devaluation of their education and pre-migration work experience. These sentiments are clearly expressed by a participant in the Hindi/Urdu-speaking focus group:

> *We feel that when they give us a visa they say only if you are a mechanical engineering or have a degree you can get the visa. But after coming here we are not getting opportunities what is the point of giving the visa. Please don't call us. This is a big humiliation to us. Don't call us here, we are fine there. It's like they bring us here and just throw us into trouble without warning.* (Participant, Hindi/Urdu-speaking FG)

Immigrant participants also talked about jobs-skills mismatch and expressed concern about downward social and occupational mobility. A participant from the all-male focus group commented:

> *And I am here in Canada since last two years. By profession I am a civil engineer but...I have not found any job. My friend before said rightly that we are here and most of us are engineers, doctors, technicians...but it is very, very hard and disappointing once we came to Canada. Even engineer, doctor...business men, they are driving taxi, ... so much technical and higher educated from the people's...country but here they are doing the job of labour. And even the labour job is not available.* (Participant, all-male FG)

A second and related concern is the accreditation process, which is costly and takes a long time. Participants with training regulated occupations felt the assessment process by professional bodies was discriminatory in nature and imposed additional inconveniences and costs. Participants expressed concerns that current accreditation processes were punitive and designed to undermine international credentials and to exclude majority of internationally trained professionals rather than providing supportive pathways to stable employment in the respective fields. A woman from the Arabic-speaking group explained:

> *We suffer from discrimination in evaluating our education or degrees. The system here does not allow us to work with our degrees we have to do more exams and get license.* (Participant, Arabic-speaking FG)

Research participants argued that employer demand for Canadian experience devalues the experience and education immigrants acquire in their home country. The persistence of this

demand has placed immigrants in a situation where they cannot be employed unless they have Canadian experience, but they are unable to attain such experience from a labour market that offers them few employment opportunities. This catch-22 was not lost on one woman in the Arabic-speaking focus group who exclaimed:

> *All jobs require Canadian experience; but if we are immigrants, how are we suppose to have Canadian experience. How can I have Canadian experience if I am not allowed to work? ...My husband is here and for a whole year he tried to do exams here, he is an engineer, but he cannot work in his field here. He looked for a job for two years and could not find any in his field. He worked in very low paid jobs. He worked as a technician and got $12 an hour. He worked in all sort of work that do not fit his work experience and knowledge of the field. The country does not allow him to gain this "Canadian experience."* (Participant, Arabic-speaking FG)

For the few who have the resources the only option has been to meet the demand of the labour market by redoing their degree in a Canadian educational institution. This was the choice made by a Pakistani participant:

> *I am a Masters student at York University. I have also completed two Masters from Pakistan but to get a professional job here, as everyone else is saying, you are constantly reminded that you need to have a Canadian education and experience.* (Participant, Hindi/Urdu-speaking FG)

Others stressed that investing in Canadian education had not translated into decent, stable jobs. Access to high-skilled jobs is particularly difficult, if not unattainable. Downward occupational mobility, de-professionalization, unemployment and income insecurity have become the reality for many recent immigrants who must jump into the labour market and accept any "survival," "odd" job they can get.

### *Non-recent Immigrants*

Research participants who had resided in Canada for more than ten years identified a different order of systemic barriers that hamper their efforts to find work. Many recalled that when they first came to Canada they moved quickly into the labour market. This meant they often did not do English as a Second Language (ESL) classes or job readiness training. The reasons for this relatively urgent and unprepared entry into the labour market varied, but the outcomes ten-plus years later were shared: deskilling, job loss and labour market redundancy. A woman from the Spanish-speaking focus group detailed her early work experience and its negative impacts:

> *I have been here for ten years and when I got here I applied for a tourist visa and then I applied for the program, and the program is very difficult and sadly you cannot study English. That is what happened to me. Because I am a professional in my country and I came here and I couldn't study English because I had to have my papers and my papers were delayed because people don't like you and they thwarted my plan until seven years later and it is after seven years that my hearing developed [in regards to understanding English] but in grammar and such I am a zero. So, one feels frustrated because of the inability to learn English. I mean [in terms of English knowledge] I am practical but not*

*theoretical. And another thing, us, well I am of the generation from the 80s and we learned typewriting we have no computer knowledge. I arrive to this country and I have no computer knowledge, I recently purchased my computer but I am at a loss.* (Participant, Spanish-speaking FG)

Similarly, research participants in the Vietnamese-speaking focus group discussed the impacts of their quick entry into the labour market. The majority of participants in this focus group were in their forties, had come to Canada at least 10 years before and had recently been laid off in haste from fairly stable, long-held manufacturing jobs. As they discussed, they are not ready for the demands of the current labour market. One individual explained:

*When you go on the internet and you see a job posting, you need to show experiences in your application. For example, know how to use computers or if you can speak basic English. You need to write this in a letter and resume to send to them.* (Participant, Vietnamese-speaking FG)

The lack of computer knowledge and fluency in English experienced by immigrants despite years of residency in Canada hinder their ability to find work. Specifically, these challenges reflect the absence of professional development opportunities within Canadian workplace to build skills that can promote long-term employment security. Research participants in this group have also tried to invest in education as a strategy to enhance their employment prospects. But this has proved time consuming, costly and ineffective. A participant in the Black community focus group explained his/her experience as follows:

*Like since I came to Canada you know I can't get this job because you need Canadian experience, otherwise you need to go to school, and I've been going to school since I came to Canada and I can't move forward because like I'm here at Seneca College a year now and I don't have the money to move forward because I can't get OSAP even if I make up all the documents that they wanted and the English and what not. So you don't have this power to go forward because how do you go to college when you can't afford it, when you don't have OSAP.* (Participant, Black community FG)

Although we might assume that after a decade of living in Canada immigrants would get past the "Canadian experience" hurdle, this does not appear to be the case.

### *Canadian-born Population*

The Canadian-born participants experience barriers in finding stable employment that overlap with but also diverge from those faced by immigrants. Two issues were highlighted in discussions: first, the long-term consequences of having a criminal record on getting work in the formal economy; and, second, the non-recognition of their Canadian education.

In Chapter 1 findings showed that the presence of police and surveillance in the Black Creek area has increased (though security and community health have not). Not surprisingly and sadly many working-age youth and adults from a racialized background in this area have a criminal record. Once a person has a criminal record, securing wage work is extremely difficult. This was a key focus of discussion in the Canadian-born and Black community focus groups. Research

participants argued that the substantial disadvantages that people with criminal record face in the labour market can potentially increase the risk of criminal recurrence.

> *I will tell you a sad story or a sad scenario. Okay, you are a university graduate and you had conflict with the law…you have a criminal record… and you can't get a job now, you are bound to go back to these temp agencies. If you have a criminal record you can't secure employment. That's a barrier right there right?… It is like a system that wants you to go back into crime. That leaves you no alternatives. Put you back into these things.* (Participant, Canadian-born FG)

The economic impact of racial profiling on racialized youth is discussed in detail in Chapter 1.

Canadian-born participants shared about challenges they faced pursuing education in Canada. Many responded to immigrant participants' concerns about non-recognition of foreign credentials by highlighting that having Canadian schooling and degrees do not necessarily lead to stable employment pathways and that the problem is rooted in deeper systems of racialized inequalities. Findings from this study add to the large body of evidence about the numerous systemic barriers that immigrants face in the labour market (see evidence generated by researchers at TEIDI; also see excellent CBR based research report titled *Refusing to Settle for Less* by Mennonite New Life Centre, 2009).

## Challenges and Obstacles on the Job

The expansion of precarious work is part and parcel of a current global transformation in the organization of capitalist production systems. The dramatic new features of working life are thus a product of global and national shifts in policy and regulatory regimes. However, the shift towards precarious work, its spread across the labour market and its routinization requires daily maintenance and regulatory changes (Peck and Tickell, 2002). The changes play out particularly at the employer-employee level, where the system must be continually propped up and maintained and worked towards by those who benefit from this arrangement—investors and employers (Burawoy, 1979; Kalleberg, 2008).  Such changes towards flexible forms of labour to meet "just in time" production are symptomatic of a broader shift towards what David Harvey (1989) refers to as post-Fordist flexible mode of production. To reproduce and normalize these changes in labour market conditions requires structural and regulatory changes geared at weakening labour standards and protection measures offered by unions and government bodies. This reproduction also includes systematic cutbacks to the vital economic and social benefits to workers that contribute to employment, income and health security for them and their families (e.g., extended health insurance, retirement benefits, overtime pay etc). These changes are justified by the neoliberal rationale that the self-regulating free market offers the most effective basis for promoting the well-being of society and that protective labour standards and regulations are counter-productive (Peck and Tickell, 2002).

The focus group discussions allow insight into this daily production and reproduction of precarious work, as well as into its impact on workers' understanding of their relationship to employers and to the world of employment more generally.

The research participants interviewed for this project have precarious jobs, if and when they are employed. Their jobs are unstable and insecure; offer limited rights, protections or benefits; allow workers little control over their schedules; and give workers little say in decisions of how work will be done. Three elements emerge from an analysis of the participants' descriptions of their on-the-job work experiences: first, employer strategies to produce employment insecurity; second, the organization of precarious work on the shop floor, which can be characterized as racialized exploitation; and, third, the erosion and denial of workplace rights.

### *The production of employment insecurity*

Employment insecurity is linked to the concept of precarious work but extends beyond conditions at a single job or in a specific employer-employee arrangement. Employment insecurity relates to what control workers have over current and future employment prospects (Lewchuk et al., 2007). Lewchuck et al (2007) have proposed a useful concept of "employment strain" to capture precarity and stress caused by lack of control over employment pathways and having to juggle multiple insecure jobs as going beyond the strain caused within a single job. Specific kinds of employer strategies produce or contribute to employment insecurity more broadly. For example, employers often use temporary agency workers and part-time work as part of a strategy to reduce labour costs and to flexibilize the workforce in line with the highs and lows of production (Bernhardt et al., 2008). In other words, they use temporary work structures to hire and fire workers to respond to the ups and downs of consumer demand.

These new strategies and means of organizing the workforce are clearly being applied to Black Creek workers, and the consequence is employment insecurity. A participant in the Vietnamese-speaking focus group recounted his/her experience of persistent employment insecurity and its impacts.

> *When I work for a company, there is a probation period of 6 months before they accept you full time. But if they laid you off after three months, you have to start all over again and that is not fair. They are so smart in doing this way so we would be part time workers all the time. So if they kept on hiring us for the whole year, but because there are breaks during the year, we'd never be considered a full time employee."* (Participant, Vietnamese-speaking FG)

Specifically, the above quote reveals types of strategies that employers are using (in the above case hiring a constant flow of people on probation with no intention of making it full time) to reproduce and make available a surplus of "part-time workers all the time."

A growing number of employers are hiring through temp agencies that generate a different pattern of employment insecurity, as workers are perennially on call and cannot predict when they will get their next contract.

> *They will ask you to finish 4 days work in 2 days and have to work very fast. Then you sit home for a week because there is no call from the agency."* (Participant, Hindi/Urdu-speaking FG)

Temporary employment agencies clearly generate income uncertainty as well since workers cannot predict when they will be called or how long their new contract will be. The exploitation and abuse exerted by these agencies and their contributions to the expansion of the working poor and the precariousness of work are considerable.

> *I just hope that the agencies and the company will hire us full time not just hiring us for a few weeks then lay us off and then rehire us to avoid the full time hiring. We need benefits and quality pay though full time work. Even when we work for six months, we should be entitles for these benefits.* (Participant, Vietnamese-speaking FG)

### *Racialized exploitation*

Research participants describe workplace situations fraught with racialized tensions between employers and employees, where employers manage their workforce in ways that produce a hostile environment and generate worker vulnerability. As this worker explains, the problem is not simply the nature of work tasks but the oppressive social arrangements and racism in the shop floor that generate stress, anger and insecurity:

> *It is so true, it's exploitation. I feel like it is legalized slavery, I've been in an environment where we were standing on an assembly line, packing and it was just the worst position… it was unbearable and there were people old enough to be my father and mother over there… it's the working conditions, they're horrible. And how they oppress you because you're a person of colour… it goes back to other systems of inequality and that we've been talking about for 100 years. Things will never change.* (Participant, Canadian-born FG)

Many research participants talked about workplace discrimination as a strategy that produces worker vulnerability.

> *They discriminate against our colour skin and because we come from agencies. And I want to cry.* (Participant, Vietnamese-speaking FG)

> *…as a Black woman in the work force they dump everything on you. They think you can handle everything, you know.* (Participant, Black community FG)

> *Like for a black kid, when you can't go out and work and when you do go out and work, you get these crappy jobs and you are just sitting there like oh man this is 8 hours I got to lift boxes and do this and do that. Especially young black males, which is one thing I put down there, they are expected to do more than they are capable of. Every time I walk into a place, I am 5'5" and 150 pounds. Every time I walk into a place they put me on the hardest machine, the hardest job. They say, 'You're young, you're black", well they don't say, 'you're black', they say, 'you're young' but I know in their head they are thinking you are black. So I am sitting here doing the hardest job making $9 or 10 an hour, not me personally.* (Canadian-born FG)

It is not simply a question of informal/direct discrimination grounded in racism, but rather that employers use racial as well as other sources of difference to segment the workforce. Conditions of racialized exploitation can pit worker against worker.

Participants with limited proficiency in English reported being particularly vulnerable to discrimination, harassment and exclusion in the workforce and were often unable to express their concerns to employers.

> *I find that I have been working many years and never got a raise. And often when I work, the boss would bully me and same with supervisors. ... Because I don't speak English well.* (Participant, Vietnamese-speaking FG)

Language, and specifically lack of English-language proficiency therefore also becomes a source of segmentation and hence of employer power over workers.

### *Lack of recourse and workplace rights*

Research participants describe workplaces in which rights and labour standards regulations are constantly violated. This is exemplified in the following comments:

> *There was a family day and they forced me to work. And some companies do not pay for the holiday. They bullied us...* (Participant, Vietnamese-speaking FG)

> *Small companies don't use the laws of Canada. Now I'm in a big company and they use the right laws but when it's busy they make you work and don't pay you double when they should.* (Participant, Vietnamese-speaking FG)

> *Some companies are also unsafe. For example, forklift and wood that's very dangerous. And we stop, they'd force us to work, they tell us to work or go home. It happens to someone I know and I get very mad. We cannot say anything about it because we don't want to lose our job. We are scared of the boss' mistreatment as well.''* (Participant, Vietnamese-speaking FG)

Individuals are sometimes uninformed about Canadian labour rights and legal resources available to them. In other cases workers are apprehensive to take any legal actions against their employers for fear of losing their job.

> *Somebody, we want to know who we could contact, who is looking out for the working people? Mistreated at the job. You have a, okay you have a set of three people that work for you. First you say supervisor, and the supervisor um have next person to talk to her or him, and then you talk to those two people. You can't get anything, they can't do anything for you, and if you pass them and go to the manager you are wrong. Right? We don't know who to go to, to talk to about the treatment on the job. What we face day by day on the job. If you're mistreated or you get fired for some reason, we don't know who to talk to. A long time ago we used to have, you can go to Human Rights ...[these are gone now].* (Participant, Black community FG)

Research participants considered that the absence of a union in the workplace also accounted for the lack of predictability, stability and security of employment.

*The company that I worked for before, for 2 years. I just got laid off. They tried to have a union. There was a big changing of the guards that happened in the big head company in Montreal. And they just closed it all down, fired all the workers. Big companies own multiple companies change they can change. It could be Nike today and Reebok tomorrow but it is still Nike who owns it or whatever. Just as an example. That is what they did when everybody tried to fight for their rights and get a union in the company. They closed it down and just changed the name, and hired new employees.* (Participant, Canadian-born FG)

Researchers like Galabuzi (2006), Ornstein (2000), Jackson (2009) Block and Galabuzi (2011) have analyzed Census data to reveal stark and growing inequalities faced by racialized groups in Canada in terms employment status, occupational access and mobility, wage rates, and income levels. Census data reveal that racialized workers (i) earn 77.5 cents for each dollar that non-racialized workers earn; (ii) are over represented in manufacturing, warehousing and transportation sectors; (iii) and are three times more likely than non-racialized people to have lived in poverty in 2005 (18.7% vs. 6%) (Block and Galabuzi, 2011). Other researchers have documented racialized discrimination and exploitation in the Canadian labour market in hiring process, treatment at workplace, job mobility and security, and the economic outcomes from these experiences (Preston et al, 2011; Reitz, 2001; Mennonite New Life Centre, 2009; Oreopolous, 2009; Palamata, 2004). Based on LSIC data, Preston et al (2011), for example, found that racialized immigrants are more than twice as likely as non-racialized immigrants to perceive overall discrimination (including in workplace). They also found that racialized immigrants with English or French language fluency are more likely to report discrimination in the workplace and argued that those with low English/French language fluency may be under reporting discrimination in the workplace. Immigrants who report discrimination (in the workplace and generally) have lower wage rate and have lower income than those who do not report discrimination Preston et al (2011). The latter finding suggests discrimination has direct impacts on employment status and income levels.

And yet, Ontario and most provinces except British Columbia lack provincial Employment Equity legislation that can overcome systemic discrimination and inequalities in employment (Cornish et al, 2009). The Ontario Employment Equity Act introduced in 1995 by the then Ontario NDP government was quickly repealed by the Harris conservative government in 1995 itself citing that this Act was reverse discrimination. There is little initiative among provincial governments to introduce employment equity legislation. The Federal Employment Equity Act was introduced in 1985 following recommendations by the Royal Commission on Equality in Employment report released in 1984 (under the direction of Justice Rosalie Abella). However, the federal employment equity legislation has not been properly enforced and is mostly focused on reporting statistics about employment inequity without proactive enforcement to overcome these inequities (Cornish et al, 2009).

The participant narratives presented in this study give a face to these macro-level data and provide rich interpretive qualitative insights about the everyday lived realities of what it is like for racialized people (immigrants and Canadian-born) to navigate and negotiate a highly racialized precarious labour market that reproduce persistent economic marginalization for many racialized working families in spite of all their efforts. In doing so, it reveals the severity of the problem and exigency for immediate policy solutions for overcoming racialized inequalities and discrimination.

## Conclusion

Results show that racialized people living in marginalized neighbourhoods face multiple interlocking barriers and discriminations in the labour market that produce systemic exclusion to stable employment pathways; the barriers and discriminations they face appear to be aggravated and compounded by the systematic decline in stable full-time jobs, the rise of temporary employment agencies and the weakening of labour standards and protections. Findings highlight that discrimination, particularly race-based discrimination (based on socially produced ethno-racial features including skin colour, accent, religious or cultural affiliation), is a pervasive factor that undermines racialized people's search for decent jobs. It also affects experiences within the workplace including the types of work that racialized people are given, occupational mobility and job security. As one service provider put it, racialized people continue to be "last to be hired and first to be fired." Study results shed light on how experiences of discrimination intersect with other factors like age, length of time in Canada, gender and English language fluency to produce differentiated outcomes.

Study findings also highlight that accessible and effective recourse to addressing and overcoming discrimination and exploitation in the labour market is lacking. For many racialized immigrants, the requirement of Canadian experience is the most significant barrier in the labour market, one not necessarily overcome even after investing in and accumulating substantial years of Canadian education and experiences.

The experiences and narratives of study participants reveal the types of strategies employers are using to reproduce a flexible labour force and precarious working conditions that meet the needs of employers and investors. Employer strategies to intentionally evade filling full-time, permanent jobs, avoid giving raises and benefits even for long-time employees, not hiring older people (because they cost more) and hiring through temporary employment agencies are the very problematic practices that create long-term employment insecurity.

Reversing racialized inequalities in the labour market requires policy interventions from all levels of government that are explicitly and proactively geared at overcoming the multiple discriminations that racialized groups face in finding stable employment they want. At the same time, policy makers and employers need to take a decisive stand to reverse the shift towards precarious forms of labour and the weakening of employment standards and workplace safety, since the tremendous social and health costs to society from this greatly outweigh any perceived temporary savings in labour costs for employers. Chapter 3 discusses the adverse health impacts of precarious work and employment insecurity.

# CHAPTER THREE

# ADVERSE HEALTH IMPACTS OF EMPLOYMENT AND INCOME INSECURITY FACED BY BLACK CREEK RESIDENTS

## Introduction

By taking a social determinants of health (SDOH) approach to research, the ISRH working group has made a commitment to understanding health in a broad way. Health is more than the condition of being free of illnesses. It relates to people's overall well-being and capacity to realize their potential and live life of dignity (Access Alliance, 2006; Raphael, 2004; Toronto Public Health, 2008). Socioeconomic conditions such as employment, income, housing, education, racism, food security and access to services are therefore equally or more important in determining health status than the provision of medical services or changing individual lifestyle factors, as many studies have recently shown (see, for example, Benzeval et al., 2001; Brunner & Marmot, 2006; Commission on Social Determinants of Health, 2008; Krieger, 1999; Raphael, 2001; Raphael, 2002; Raphael, 2004).

In this chapter, findings related to the health impacts of labour market discrimination, employment and income insecurity are presented and analyzed with this concept of health in mind. During the focus group sessions, we used an innovative "body mapping" tool to invite participants to map the links and pathways (direct and indirect) through which their everyday and/or protracted experiences of insecure employment and income negatively impact on their physical, mental, family and community health in immediate terms as well as in longer-term, compounding ways.

Study findings indicate that low-income, racialized people and their families in the Black Creek area experience multiple negative health impacts and overall deterioration of health due to conditions of employment and income insecurity. Results indicate that the prevalent health outcomes of labour market discriminations, employment precariousness and income insecurity include mental health issues (e.g., stress, depression, hopelessness, addictions), digestive disorders (e.g., ulcers, constipation, diarrhea), physiological impacts (e.g., fatigue, exhaustion, weight gain/loss, chronic pain), cardiovascular impacts (e.g., hypertension, high blood pressure) and direct workplace injuries. Participants also discussed how different health issues intersect with each other (for example, stress leading to ulcers) and cumulative worsening of health. We introduce a concept called "health strain" to capture the cumulative deterioration of health due to multiple, repeated stressors related to employment and income insecurity.

Participants linked health impacts to three dimensions of employment and income: first, to insecure employment relations; second, to insecure and unsafe conditions of work; and third, to income insecurity. Study participants showed critical awareness that the root cause of many of their pressing health issues is linked to insecure employment and income conditions. Participants expressed deep concern and even despair at being stuck in a protracted, self-reinforcing cycle of bad jobs, poverty and long-term deterioration of their health; in other words, the perception of worsening economic and health conditions was itself a source of major stress. Of particular concern were negative impacts on family and on children's health.

Findings are reviewed beginning with a discussion of the health status and health concerns faced by precariously employed racialized groups in Black Creek. Next is a look at how these negative health impacts are linked to insecure employment relations, insecure and unsafe work conditions and income insecurity. Based on this analysis, a conceptual map of the interrelationship between employment, income and health emerges that highlights pathways that lead to overall health deterioration for racialized families, and systemic racialized health disparities.

# Current Evidence on Links between Employment, Income and Health

Existing SDOH literature indicates that employment and income are core determinants that have multiple health impacts and influence many other determinants including food security, education, access to services and social inclusion (Lewchuk et al., 2006; Raphael, 2004; Lynch et al., 2000; Ruetter, 1995; Lightman et al., 2008). Many Canadian and international studies have shown a strong correlation between having a low income and high morbidity and mortality rates (Commission on Social Determinants of Health, 2008; Lightman et al., 2008; Marmot, 2001). The presence of a "social gradient of health" in Canada corresponding to income levels has been well documented (see, for example, Toronto Public Health, 2008 and Lightman et al, 2008). Several national and city-level studies have revealed that Canadians at the bottom of the economic ladder are more likely to be affected and die from most diseases, including cancers, heart disease, diabetes and respiratory illness (Advisory Committee on Population Health, 1999; Wilkins et al., 1989; Toronto Public Health, 2008).

Examining census and Canadian Community Health Survey (CCHS) data, a recent report by Toronto Public Health (2008) called *The Unequal City: Income and Health Inequalities in Toronto* found a "clear gradient" linked to income level for several health indicators, including life expectancy at birth, all-cause premature mortality rates, singleton low birth weight rates, self-reported health, teen pregnancies, lung cancer rates, cardiovascular disease, premature mortality rates and dental visits. Another report called *Poverty is Making us Sick: A Comprehensive Survey of Income and Health in Canada* (Lightman et al., 2008) revealed that low-income people have significantly higher rates of diabetes, bronchitis, arthritis, rheumatism, ulcer and a host of other chronic illnesses compared to wealthier people. The study's authors conclude that "poverty is triggering a devastating health crisis among lower-income people." A pan-Canadian study of 15 CMAs conducted by the Canadian Institute for Health Information (2008) found that people with low socioeconomic status had higher rates of hospitalization for 21 health indicators (see the CIHI report titled *Reducing Gaps in Health. A Focus on Socioeconomic Status in Urban Canada).* Researchers examining labour market issues have shown that the rise of precarious employment and unsafe work conditions also have profound negative impacts on health (Benach, et al, 2007; Bohle et al, 2001; Lewchuk et al., 2006; Sirgrist et al, 2010).

Despite a growing body of SDOH research focusing on income and employment, the everyday pathways through which insecure employment and insecure income lead to negative health outcomes and health inequity are still poorly understood. There is also a dearth of qualitative studies on how low-income people understand and perceive the relationship between employment/income insecurities and the negative health issues they face. The present study provides valuable evidence about the everyday interrelationship between employment, income and health based on the perspectives and critical analysis of our focus group participants.

Moreover, within Canadian literature on SDOH, very few studies have examined the role of race and racialization in spite of growing macro-level evidence indicating that racialized groups in Canada are disproportionately overrepresented in insecure/precarious jobs and low-income categories and are most at risk of experiencing health status deterioration and health inequity (see Block and Galabuzi, 2011, Galabuzi, 2006, and Ornstein, 2000). Thus, in our intersectional analysis, we treat race and racialization as a core, cross-cutting co-determinant for employment, income and health security.

# Results and Discussion

## Health Status of Racialized Groups in the Black Creek Area

Results from study survey, body maps and focus group narratives indicate that participants are experiencing multiple negative health concerns and deterioration of health status. Survey data on study participants' self-rated current health status are alarming: 40% of participants reported their current health status to be less than good ("fair" or "poor"). The significance of this comes to light when the result is compared with evidence on self-rated health from other studies. The 1998 National Population Health Study (NPHS) found that only 4.5% of Canadians reported their health to be "fair" or "poor." This dramatic discrepancy is charted in Figure 3.1.
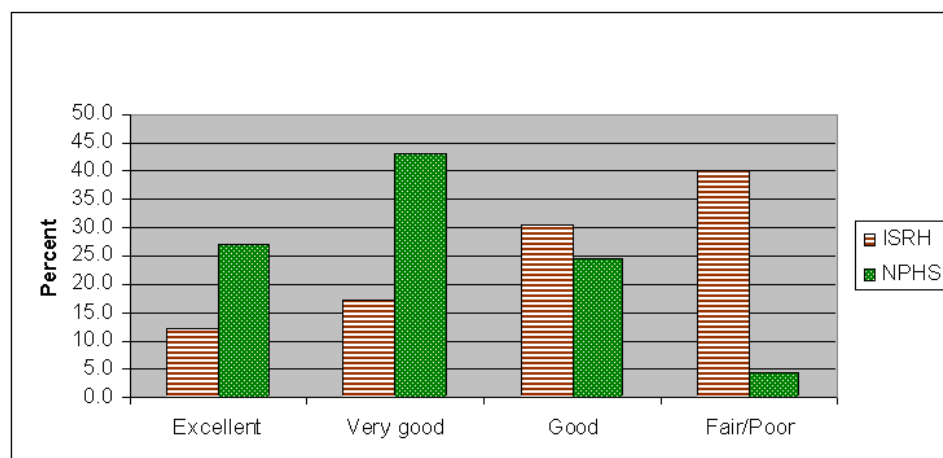


**Figure 3.1 Self-rated Current Health Status**

In the CCHS survey, about 8% of respondents rated their health as "fair" or "poor." Similarly, in the Longitudinal Survey of Immigrants to Canada for Wave Three interviews (four years after arrival in Canada), 8.1% of immigrants rated their health as "fair" or "poor." In other words, the study participants in the present research, who are precariously employed, low-income racialized people in Black Creek, are 5 to 9 times more likely than other groups in Canada to rate their health as less than optimal. Studies have found that, compared to other groups, low-income and precariously employed people are slightly more likely to rate their health as "Fair" or "Poor". For example, CCHS found that 12% of people in the lowest income category rate their health as fair/poor health. Similarly, a study by Lewchuck et al. (2002) documented that about 12% of precariously employed people rated their health as fair/poor. Still, precariously employed, low-income racialized people in the present study are 3 times more likely than other low-income and precariously employed people to rate their health as fair or poor. We also asked respondents about change in health status in the last five years; 37% reported that their health had "become worse" in the last five years.

The body maps serve as another source of evidence about health status of study participants. Each focus group produced complex body maps, since every participant mapped multiple illnesses and poor health conditions that they were contending with. Physical health issues tended to be mapped directly onto the exact location of the body where illness was occurring. Mental health issues were

mapped onto the heart or the head. Impact on family was mapped outside the schematic of the body. Figure 3.2 is an example of one of the body maps.



**Figure 3.2 Body map of health impacts**

The body maps symbolically and figuratively capture the numerous health issues the participants face and the deteriorating health status of racialized groups in the Black Creek area. In other words, the body maps are symptomatic of the worsening collective health status of racialized groups and the systemic health inequities they face. The focus group discussion based on the body maps identified additional health issues, particularly impacts on family and children. Table 3.1 summarizes the key health issues that were mapped and discussed.

| Table 3.1 Types of Health Issues faced by Precariously Employed Racialized People | | |
|---|---|---|
| **Impacts on Individual Health** | Physical Health | digestive (diarrhea, constipation, ulcers); physiological (weight gain/loss, exhaustion, chronic headaches and backaches, lung damage, urinary tract infections); cardiovascular (high blood pressure, hypertension) work related injury and disability; chronic conditions (diabetes); other (loss of hair, etc.) |
| | Mental Health | addiction; anger; depression; feeling hopeless; self-doubt; stress; worry; insomnia; lack of self-care; lack of concentration; humiliation; loneliness; shame; disempowerment |
| **Impacts on Family Health** | Family Roles & Relationships | domestic violence; marital tensions; lack of quality family time; lack of leisure/vacation time with family; family separation |
| | Children's Health | tension between parent(s) and children; children become inactive and dull; children have lower self-esteem; lack of nutrition; neglect; children's future jeopardized; lack of educational support; lack of resources for extra-curricular opportunities; isolation from peers |

These multiple health concerns discussed in focus groups correlate with the low self-rated health status in the survey. Triangulation of study data from the survey, body maps and participant narratives all align to underscore that low-income, precariously employed racialized people in Black Creek are afflicted with multiple health concerns at the level of the individual and the family, and are experiencing deterioration in overall health.

Most studies on self-rated health, including NPHS, CCHS and Lewchuck et al (2002), do not include a race-based analysis. Results from this study underscore the need to pay closer attention to the role of race and racialization in determining health status. Study data also point to another determinant that deserves closer attention: neighbourhood. As discussed in Chapter 1, a small but growing body of literature is revealing that living in a marginalized and stigmatized "priority" neighbourhood can have multiple health damaging outcomes and thus lead to poor health status (Wilson, 2006; Osypuk and Acevedo-Garcia, 2010).

## Employment and Income as Determinants of Health

After participants mapped the health issues on the body map they were asked to discuss the specific pathways and mechanisms by which employment and income insecurity had caused these problems. As noted earlier, focus group participants had critical awareness that many of their pressing health issues and the deterioration of their overall health status are linked to the insecurities they face in terms of employment and income. Participants linked their health concerns to three dimensions of employment and income insecurity: insecure employment relations; insecure and unsafe conditions of work; and income insecurity. Each dimension is reviewed in detail below and the interrelationship between these dimensions is explored in the final section of this chapter.

### *Health and insecure employment relations*

Insecure employment relations refers to insecurity in the access to or status of one's employment, including being unemployed, underemployed or over-employed (i.e., juggling multiple jobs). It also relates to the nature of one's employment and includes unstable, part-time, casual, shift-based and piece meal jobs through temp agencies; jobs that keep workers on call every morning; jobs without benefits; low-paying jobs; jobs that demand long hours and require workers to work late and travel long distances; jobs that devalue credentials; and jobs that are not in one's field. Participant narratives provide new insights about specific pathways (direct and indirect) through which everyday and protracted conditions of insecure employment lead to deterioration of health.

More than 80% of study participants agreed that not having a decent, stable job was negatively affecting their physical and mental health. Similarly, over 80% agreed that "poverty and lack of income security directly leads to poor health." These results are summarized in Table 3.2. About one-third of participants indicated that their current work negatively impacts their health at least half of the time. Just over one third of participants indicated that their current work makes them depressed at least half of the time. Almost a quarter of the participants (22.2%) reported that they have suffered work related injuries or illnesses.

| Table 3.2 Survey responses on relationship between stable jobs, income security and health | | |
|---|---|---|
| **Statement** | **Strongly Agree** | **Agree** |
| In order to have good health, one needs to have a stable job | 69.6% | 23.2% |
| Not having a decent, stable job is negatively affecting my mental, emotional health | 53.3% | 33.3% |
| Not having a decent, stable job is negatively affecting my physical health | 45.3% | 33.9% |
| Poverty and lack of income security directly leads to poor health | 52.2% | 36.2% |

During the focus group discussion participants shared their critical perspectives on how and why a stable employment condition is a predictor/determinant of health. Some participants discussed health impacts of insecure employment in very direct ways, mapping the specific pathways through which particular ailments have resulted for them. For example, one participant from the all-male focus group traced how not having employment security leads to stress, which in turn directly affects your stomach and leads to ulcers.

> *Job yes. And once you don't have, stress increase directly into your stomach and the ulcer bleeds there and every time your wife she fight, that is what have you got you came at morning and came at night. What happen? You got the job?* (Participant, all-male FG)

Similarly, another participant from the Spanish-speaking focus group indicated that the inability to find stable employment not only leads to stress but directly affects her stomach:

> *Well, in my case, when I have any difficulties, it affects my colon, it becomes inflamed [laughs nervously] and I feel really bad. I have a lot of stress, nerves, when things don't come out right, when I can't find a job, so I begin to have stomach problems.* (Participant, Spanish-speaking FG)

Another participant from Spanish-speaking focus group linked the cause of her heart arrhythmia (tachycardia, a commonly used term among Hispanic community to refer to condition of heart beating too fast) to the chest pain, anger and stress resulting from job insecurity.

> *I get tachycardia. For example I get chest pain when I get mad or I'm worried. That's what I feel. I feel pain and pressure and I feel that [makes a noise] like it is revolving…Umm I feel like my tongue falls asleep [pause] That's what I get when I'm angry or I'm worried.* (Participant, Spanish-speaking FG)

Other participants discussed other ailments, including arthritis and hypertension as related to the bad jobs they are in. Many participants discussed physiological impacts such as extreme fatigue and exhaustion due to having to work multiple low-paying jobs. The fatigue in turn leads to numerous other negative impacts on their individual health (being easily irritated and angry) and their family health (for example, not being able to spend time with their spouse and children).

*Of course it is all physiological, it exhausts me. All this at the end of the day does not really get me more that CND $1,100-1,200. I am exhausted.* (Participant, Arabic-speaking FG)

Female participants in particular highlighted the sheer exhaustion of having to juggle work and household responsibilities and the frustration of not being able spend time with family due to this exhaustion. The following quote succinctly illustrates this condition:

*I do more than one thing a day. I tried to find job in cooking, although I am now a part time baker, my son in day care, I come home around 19:00 really tired. There is nothing stable and clear. As I go home so exhausted and I have to cook for the next day I feel so exhausted, really exhausted. My husband work so hard and I do not see him sometimes, we sometimes end up mainly talking on the phone. I am tired so I cannot hang out with my daughters.* (Participant, Arabic-speaking FG)

Many participants pinpointed the failure to find a job or being stuck in low-paying, on-call jobs outside of their field as key sources of many of their mental health concerns:

*not having a job could go along with your mental health and emotional health as well because your mindset will always be on, not being treated properly at work and you might bring that home with you and not being able to do certain things around the house that under normal circumstance you would be able to do very well. That could affect you in the long run.* (Participant, all-male FG)

Immigrant participants from different focus groups talked about the sadness, humiliation, depression and negative impact on self-esteem resulting from not finding jobs in their field and/or the lack of recognition of their previous credentials and work experience:

*Due to education devaluation the confidence decreases and that affects health.* (Participant, Hindi-Urdu-speaking FG)

*He could not work in Canada. He had 18 years of experience in his field elsewhere. He suffered a lot really. Sometime my husband would cry.* (Participant, Arabic speaking FG)

Another immigrant participant pointed out how non-recognition of foreign credentials forces immigrants into employment types in which they do not have the necessary skills, such as hard labour jobs. This, in turn, increases their risk for injury and for "a lot of health problems." Some respond to such experiences by internalizing the problem and blame oneself. In the words of one participant:

*Also, despite studying you don't get a good job in your field. Then you start wondering what is wrong, why can't I get a good job?...the graph goes like that when you come you think that you can do something here in order make a good life but your hopes are dashed. This affects the mind and it feels like all the problems are on you.* (Participant, Hindi/Urdu-speaking FG)

Several participants, particularly female participants, expressed concern about the increase in addiction to high risk substance (cigarettes, alcohol, etc.) in their family as a way of coping with the stress of employment and income insecurities.

> *I feel bad, I feel bad because my husband feels the same way and his depression is alcohol [pause]. Sometimes I have to calm myself with him, because he is a professional and he feels that as a man, he cannot cry [crying, inaudible] his refuge is alcohol* (Participant, Spanish-speaking FG)

> *My husband drinks coffee and smokes a lot so he can think and get over his stresses. He is very stress and has a lot of anxieties, so he goes to smoking and etc. so he can escape from reality. In addition he harms his health and after all it is a waste of time. Since he has no job he goes to things that might harm his health, his physical and psychological health.* (Participant, Arabic-speaking FG)

One participant mentioned how job insecurity increased the risk of addictive behaviors, which in turn resulted in stomach pain and weight gain. The end result for them was chronic leg pain.

> *I get anxious and start chewing something and it gets me nervous, it gives me stomach pains because I want to eat and eat and I gain weight, my legs hurt, I have a job where I stand all day so that affects my body too.* (Participant, Spanish-speaking FG)

Some participants also pointed out how not having jobs or the lack of stable and meaningful employment leads to loneliness and social isolation. One participant brought up the fact that it is hard for people to socialize if they do not have stable employment in their field. These responses capture a keen awareness among participants of the remarkably intimate pathway between unstable/precarious work and negative mental and physical health effects.

### Health and insecure/unsafe conditions of work

Participants identified a number of specific health impacts due to insecure and unsafe conditions of work. Insecure and unsafe conditions of work include environments without proper safety protocols and safety equipment; working with unsafe equipment; a fast pace of work; physically demanding work such as repeated heavy lifting; work that requires standing for long periods of time or sitting too long in front of a computer; work that requires people to put in long and late hours; as well as conditions related to workplace relations, like abuse, harassment and mistreatment by employers, workplaces prone to gender and racial and other discrimination, and excessively competitive work environments. It is important to examine the health impacts related to conditions of work, since even if one has a full-time, stable job, the work involved or work environment may be very unsafe or excessively demanding.

In the survey with study participants 22.2% reported that they have become injured or ill due to past or current jobs. Of the respondents who were employed at the time of the survey 43.8% reported that their current work is negatively impacting their health "half of the time," "most of the time" or "always," while 34.5% reported that their current work makes them depressed "half of the time," "most of the time" or "always."

The following quote recounts the story of someone ending up with backaches and disability because of having to do a very difficult factory job:

> *My friend's husband didn't know English, he didn't have time to study English either, he has family to support and he needs to find an apartment and pay the rent, so he went to work in a factory, but it was metallic and steel things. Imagine, he has a disability now, because he didn't know how to speak the language so they sent him to do the most difficult work and he used the wrong equipment. He worked there for 10 years, he had back aches, and when he went to the doctor to check with his back aches, he told him that the work you were doing was harsh it is a machine work not human.* (Participant, Spanish-speaking FG)

The quote also speaks to a prevalent situation in which immigrants with low English-language fluency are more likely to be given the most difficult work.

Another participant described how heavy labour work not only impacts the back but also can result in stomach pain due to carrying heavy loads after eating lunch.

> *I work in a wood factory. After I eat, I have to carry heavy loads and I get stomach ache because of that. And wage is minimum. I also get back pain from carrying the load.* (Participant, Vietnamese-speaking FG)

Workplace injuries due to lack of proper safety protocols were a major concern, particularly for those working in factories. A participant from the Vietnamese-speaking focus group elaborated on how some employers do not observe occupational safety protocols and require employees to work with old, heavy, dangerous machines, thus leading to an increased risk of workplace related accidents.

> *Some companies are also unsafe. For example, forklift and wood that's very dangerous. And we stop, they'd force us to work, they tell us to work or go home. It happens to someone I know and I get very mad. We cannot say anything about it because we don't want to lose our job. We are scared of the boss' mistreatment as well… The boss is not using the Canadian laws about safety.  The machines are old and very dangerous.  When the boss keeps on pushing, people get scared and that is when accidents happen.  He just pushed and when we say that it is not safe. He does not care. He then suggests that it is not our concern as if we are not allowed to voice our opinion.* (Participant, Vietnamese-speaking FG)

The predicament of working somewhere unsafe is made worse by the fact that, as the quote points to, employees are often scared to complain because of fear of reprisal and losing their job. Even if they do request better safety protocols, it's possible that, as in this case, employers "do not care." Several studies have highlighted that having low English-language fluency makes workers more vulnerable to being exploited and mistreated, since language barriers may preclude these workers from seeking formal recourse (Premji et al., 2008).

Another participant recalled how her husband injured his feet at work due to not having access to proper safety equipment. The foot pain, in turn, affects his sleep.

*My husband has injured his feet because of his work, he sometimes cannot sleep well at night from the pain, I try to give him medicine but it does not help. I suggest that they should provide safe equipment and shoes for workers. Some workers cannot afford this expensive equipment; some would buy these safe equipment but the cheap ones not the best quality.* (Participant, Spanish-speaking FG)

A female participant shared how she developed allergy and breathing problems because of having to use harsh cleaning chemicals without gloves or a mask in her cleaning job (the only job she has been able to find):

*...the only job I have been able to find since I arrived is in cleaning [laughs] . I don't do it anymore because bleach is really bad for me, I've developed an allergy to it and I can't breathe anymore so chemicals are really terrible. So I put the lungs [picture for the 'Body Mapping' exercise] because it's something that affects one's health terribly, I've even had to go to the hospital because of using chemicals. ...they (employers) don't provide you with...no gloves or a mask. No, nothing. And one has to pay for it and then it's not enough, what little they give you, they take money off your check to buy gloves.* (Participant, Hindi-Urdu-speaking FG)

This experience exemplifies how insecure employment relations (many immigrant women being able to find only cleaning jobs in spite of high qualifications) intersect with unsafe work conditions and produce negative health outcomes. The gendered nature of occupations with insecure/unsafe work conditions also emerge here as an important factor that needs to be taken into account when evaluating these outcomes.

Several participants noted how employers pressured them to work faster and harder, like machines, leaving them vulnerable to hand and shoulder pain or injury.

*...you are told to work quickly and at work they pressure you because of that you get hand and shoulder problems. They think you are a machine, they keep telling you to work faster.* (Participant, Hindi-Urdu-speaking FG)

### Health and income insecurity

Participants made clear connections between income insecurity and health impacts. Income insecurity includes conditions of inadequate income, irregular and unstable income cycles and high levels of debt. Income insecurity makes it difficult to afford essentials like rent, food, transportation and medicine, which in turn results in material deprivation, stress and other negative health impacts. Studies indicate that while employment insecurity has strong correlations with income insecurity, the relationship is not always straightforward. A variety of other socioeconomic factors such as family size, assets, inheritance, household expenditure and access to social assistance also come into play in shaping income security. While certain conditions of employment insecurity and employment strain may also be experienced by people who are not low income, the compounding negative impacts on health from employment insecurity and income insecurity can be detrimental.

Over three quarters of the participants (76.4%) reported that they have "difficulty" or "great difficulty" meeting their "basic needs" (within this number, 25% indicated that they have "great difficulty" meeting basic needs from their monthly household income). The majority of participants (88.4%) either "strongly agree" or "agree" with the statement that poverty and lack of income security directly lead to poor health, with 52.2% saying they "strongly agree."

One participant discussed how the stress he feels at not having secure income and not being able to pay bills and rent leads to heart problems, including high blood pressure.

> *Heart problem. I mean stress as a result of your, unable to pay your bills, rent and all of that. More stressful on the heart. High blood pressure and people that have all these economical and environmental issues, they may affect their health overall.* (Participant, all-male FG)

Another participant spoke about having panic attacks every time the phone rang. She was worried that it might be a creditor or a utility company calling about unpaid bills. Several more participants expressed concern about not being able to visit their families "back home" because they could not afford the airfare.

During the focus group discussions many participants reflected on the close relationship between income insecurity and food insecurity (not being able to afford good, healthy food) and how this relationship in turn leads to poor overall health. The following quote highlights the close link between income insecurity, food insecurity and health:

> *Of course, then it comes to the low paying job and that affects your health as well because of course you can not afford a good meal and all types of things and ultimately cannot support your family as you like to maintain it.* (Participant, all-male FG)
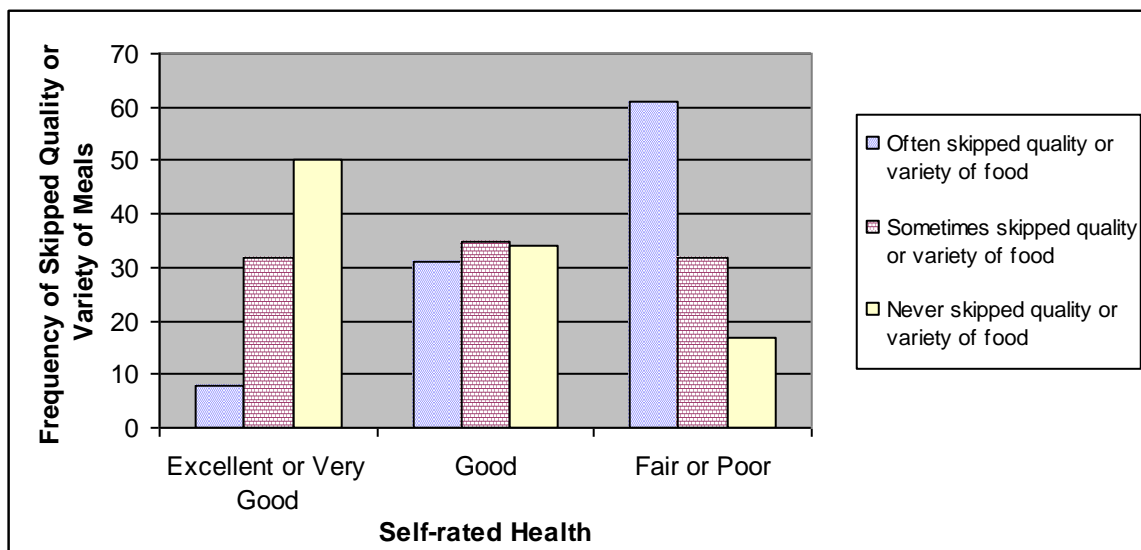


**Figure 3.3 Relationship between Self-rated Health Status and Skipped Meals**

This is consistent with survey data, which found a very strong correlation between income insecurity, food insecurity and negative health status. Almost two thirds of respondents (61.5%)

who reported that they are "often" unable "to eat the quality or variety of foods they want due to lack of money" also reported their current health status to be "fair" or "poor" (see Figure 3.3).

A large number of participants mentioned that due to insecure income they are often not able to afford medicine and other health services not covered by the provincial public health insurance program, Ontario Health Insurance Program (OHIP), such as dental care, eye care, physiotherapy, acupuncture and massage therapy. One participant discussed this in the following way:

> *Well first I wrote down good healthcare for family. Especially if you have a family and don't have a job you are not able to provide the best healthcare for them. Especially if for instance somebody is on some medication and you have to purchase it and you don't have that, which is lack of good healthcare for them.* (Participant, all-male FG)

The gravity of this problem comes to light when one realizes that working poor are the very population that would benefit most from these extended health coverage like prescription drugs, dental, eye care, massage therapy, physiotherapy and chiropractors (to relieve their body pain, for example) and yet they appear to be perpetually stuck in the types of employment that do not offer extended health benefits. There is an urgent need to make extended health services more affordable and accessible, if not part of the universal health care program.


## Impact on Health of Family and Children

Participants from all focus groups were especially concerned about their worsening family health status due to the employment and income insecurity they face. Many participants talked openly about weakening marital relationships and family cohesion. As one participant put it, "There is absolutely no family life." Another participant indicated that she talks to her husband more on the phone than in person. Not being able spend time with family due to lack of stable employment, irregular work schedule, having to work weekends was a prominent concern:

> *[I selected] cell phone: I don't know what to say. I work five days a week, I am a babysitter, I need a vacation and I can't take at all. Sometimes I work in the weekend; people expect me to work more, but I can't, I do not have the ability. I'm on the phone a lot with my partner because we do not have time we end up talking on the phone a lot and I talk a lot about my frustration.* (Participant, Arabic-speaking FG)

> *We don't spend time with the child and we don't spend time as a family. That affects us a lot. [inaudible] and the stress as well, not having money or a stable job, we don't have time to say let's spend some free time or go to a park.* (Participant, Spanish-speaking FG)

This situation is made worse by lack of affordable daycare/childcare programs in Ontario. Several participants mentioned that one adult member of their family has to work night jobs so that they can take turns looking after their children. Such arrangements leave very little time for the family to spend as a unit. Some noted that this problem becomes worse during summer periods when children are off school. In other words, working families perceive summer vacation for their children not as opportunities for spending quality family time but rather as a source of additional stress and family separation.

Some noted an increase in domestic tension due to insecure employment/income. A male participant shared his concern about increases in marital tension (due to income insecurity and not being able to spend time with family due to long work hours) and added that this phenomenon was widespread:

> *Everyday myself and wife we fight. You go in morning and come at night. This is night and what have you got? What you have got is three children there for you and they have the demand. I don't have the car to take them to any public place and if I tell them, "Okay, we go", we need $20 for the public transport. So every time we fight.* (Participant, All-Male FG)

One of the biggest concerns that a large number of participants raised was the negative impact on their children's health. Participants were very worried that their children's health was being compromised because they could not afford nutritional food, educational fees, fitness and other extra-curricular activities. Participants were also concerned about not being able to give quality time and teach positive life skills to their children because of their unstable work schedules. The following quote illustrates this:

> *Yeah, [it's] an emotional stress on her [the child] because she's not actually spending time with you, so it gets the child kind of irritable… and sometimes they will say, "Mommy, you are so boring," because you take them outside [but] you are so tired you don't wanna move.* (Participant, Black Community FG)

Several participants mentioned that not being able to afford educational costs for their children was a major source of stress, particularly because they perceived investing in their children's education as one of best strategies for overcoming employment and income insecurity.

> *Education. Lack of education. Some people may lose hope and despair because they cannot afford to go to school and pay school bills. You have the ability but can't afford the program or course so it creates stress. So for parents, if they know the children have the ability but they can't afford to send them to a certain school or program, you know it affects their wellbeing.* (Participant, All-Male FG)

Mental wellbeing of the family and the children is particular affected by employment and income insecurity. One participant expressed her anguish in the following way:

> *Anguish and sometimes because of anguish we talk and we are not supposed to speak about problems in front of the children. The other day I say, mi hija [my daughter], if they call me at 5 in the morning I have to take you to your grandmother's house and she gets up and asks "are we going to go?" oh my god, next time I say I'm not going to tell you anything because it's wrong. Not only is it my problem but I'm also affecting my daughter.* (Participant, Spanish-speaking FG)

These findings show that the employment and income insecurity cause serious family level and intergenerational health impacts.

## Health Strain, Long-term Health Impacts, and Racialized Health Disparities

A closer analysis of study results points to a more salient finding: that employment and income insecurity have long-term cumulative and compounding negative impacts on individual and family health. Focus group participants discussed how immediate/acute health issues could become compounded into long-term/chronic conditions. Similarly, participants talked about how mental stress they experienced due to bad jobs resulted in various physical ailments. Furthermore, study evidence demonstrate how the different dimensions of precarious employment (insecure employment relations, unsafe working conditions and the resulting income insecurity) can produce multiple and repeated physical, physiological and mental stressors on individual and family health. Participants also discussed how precarious employment and income insecurity negatively impact on other determinants of health (food security, education, social networks, social inclusion), which in turn results in a range of negative stressors on individual and family health. This negative cycle of cumulative and compounding impacts can have detrimental impacts on long-term health and well-being. In some cases these negative health impacts may be irreversible. In other words, even if a person does manage to get a stable job, it may be too late to rectify the health impact. Moreover, cumulative deterioration of health can undermine people's chances of getting stable employment in their field and/or can push people completely out of the labour market, as happens when they incur serious injury or disability due to a bad job. Figure 3.4 (also our concept for the report cover) captures the compounding health impacts of precarious employment conditions.



**NATURE/QUALITY OF EMPLOYMENT**
Unstable jobs, part-time, casual, shift work, piece-meal jobs through temp agencies, jobs that keep workers on call every morning, jobs without benefits, low-paying jobs, jobs that demand long hours and require workers to work late and travel long distances, jobs that devalue credentials, jobs that are not in one's field.

**ACCESS OR STATUS OF EMPLOYMENT**
Unemployed, under-employed, over-employed (i.e. juggling multiple jobs).

**INCOME INSECURITY**
Conditions of inadequate income, irregular and unstable income cycles, and high levels of debt.

**Discrimination while looking for a job**

**INSECURE AND UNSAFE CONDITIONS OF WORK**
Workplace without proper safety protocols and safety equipment, working with unsafe equipment, fast pace of work, hard work such as repeated heavy lifting, demanding work, work that requires standing for long periods of time or sitting too long in front of a computer, work that require people to work long hours and late hours, as well as workplace relations conditions including abuse, harassment and mistreatment by employers, workplace prone to gender and racial and other discrimination, and excessively competitive work environments.
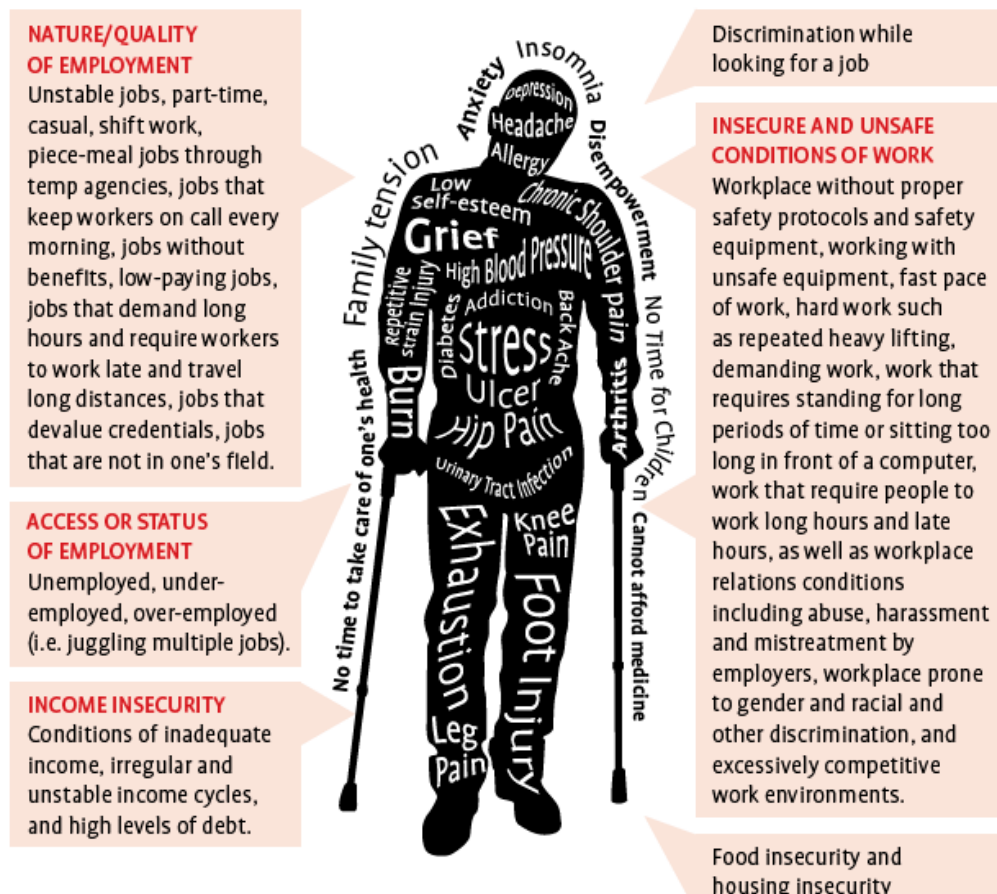
**Food insecurity and housing insecurity**

**Figure 3.4 Bad jobs are making us really sick**

The following quote illustrates how the cycle of bad jobs and poverty results in multiple and compounding negative impacts on the whole body and overall health of family and children:

*… by not having money, I can't buy food that [inaudible] so then I have to go to a food bank, and the food bank gives food that is leftover. If it gives vegetables it's vegetables about to go bad so that affects me. If I get sick and I can't buy my medicine, can't feed my children well I can't give them medicine if they get sick because I don't have a stable job. Is a part time job going to give me benefits? No. it's like a cycle, like we say, [inaudible] it's garbage.  when I don't work, when one is in poverty, it's something that affects the whole body, mental health, physical health, the stress makes me gain weight, my children are not fed well they are not with a fresh mind because they don't have fresh vegetables, everything that feeds the mind.* (Participant, Spanish-speaking FG)

That the whole body is harmfully impacted was a common theme among many focus group participants. As one participant put it:

*For our health it goes back to not being able to secure employment and then the overall it just puts you back into a…. from a mental health issue, from the overall.. because if you are unable to make ends meet and you don't have the education, you going to have to pick up a job and you have to work pay cheque to pay cheque and so forth… And overall that is going to affect the whole body right because if you have to work a couple of jobs, dead end jobs it is going to frustrate the whole body.* (Participant, Canadian-born FG)

Along the same lines, another participant mentioned:

*health is affected, long term health problems, high blood pressure, diabetes, general health is affected, when one is engaged in working or thinking about work, no time to take care of ones kids. You are always stressed, no time to do anything else for ones heath. All this have negative affects on you and on your kid's health. You can't give the your kids their attention or rights, you want to give them a lot of things but you neither have time nor your state of mind and mood, so it makes me feel bad.* (Participant, Arabic-speaking FG)

The above quote poignantly underscores how precariously employed families may end up in conditions where they feel that they don't have the time or the "state of mind" to proactively address the multiple and mutually reinforcing health problems they or their families are facing. Similarly, another participant spoke about how economic distress weakens the ability of family to "deal with internal stresses":

*Of course! The family won't be healthy if there are economic distresses. Of course when I am busy looking for a job I won't have time for my kids to take care of them. Instead of being calm with them and sit and have quality time with them to teach them positive life skills…no I might be angry and I might be harsh on them and have no patience for them. Anything any problem a family like that won't be able to deal with its internal stresses. It will be an unhealthy family."* (Participant, Arabic-speaking FG)

These narratives highlight that disempowerment – the inability to deal with internal stresses and to take care of oneself and one's family—is itself a marker and determinant of poor health.

We find the concept of "health strain" useful for understanding the mediating pathways to long-term cumulative health impacts and for mapping the continuum of precarious, income insecurity and deterioration of health. Our conceptualization of health strain parallels Lewchuck et al.'s (2002) concept of "employment strain," which refers to the economic strain and stress caused by employment insecurity and having to juggle many unstable jobs (that go beyond the strain caused by insecurity from a single job). By health strain we refer to cumulative strain or negative effects (visible or invisible) on overall health due to multiple stressors impacting in single, repeated or compounding ways. We are introducing the concept of health strain to encapsulate the following relational aspects of health. First, even when negative stressors may not have direct, immediate and visible impacts on health, these stressors may create indirect strain on health that can manifest in other indirect ways at a later time. Second, some health impacts may not be completely rectified and could continue to strain a person's health even after the cause of the health impact is overcome (for example, a workplace related injury incurred in an unsafe workplace may continue to afflict a person long after the person has found a safer workplace). Third, multiple and repeated negative stressors on health (even if they are small stressors) can result in an accumulation of strain on health that can result in a detrimental impact on overall health including high morbidity and mortality. Concepts of repetitive injury and strain have of course been used to explain some specific health conditions (eg repetitive stress injury of muscles, tendons, joints). We suggest expanding this concept more broadly (health strain) as a way to map cumulative and compounding pathways of health deterioration.

It is worth noting that at first glance, many of the health concerns identified by participants appear to be "minor" everyday health issues such as digestive problems, exhaustion, headache, backache, leg pain etc. This is partly because many of long-term and more severe health conditions (diabetes, stroke, etc) have more complex causal relationships. At the same time, the accumulation and compounding of these everyday and immediate health concerns produced by protracted conditions of employment/income security can result in long-term pathways of health strain and health deterioration, including more serious health conditions like cancers, diabetes, stroke, arthritis, spinal injury etc. Compared to precariously employed marginalized people, those with more stable employment status (with extended health coverage) and income security are not just exposed to lower levels of employment/income related health risks but also are more in position to buffer and counter health strain and health deterioration. The following reflection by a Black Canadian-born participant about the poor health status of his mother, who came to Canada as an immigrant, captures how years of difficult work inflicts cumulative health strain and health deterioration:

> *Like the Black community if find, you work I mean our parents they work their hardest and they do so much but like my parents are old and I look at their health it's so terrible. My mother is very old and has high blood pressure, is diabetic, had a heart attack, had a stroke, and know what I am saying.* (Participant, Black community FG)

Sadly, results indicate that many racialized people accept, rather than question, the untimely and rapid deterioration of their health as being inevitable.

At the systemic level, disproportionately large number of racialized people facing persistent negative health exposures and health strain caused by protracted conditions of employment and income insecurity is one of the primary causes of racialized health inequalities. Lynch et al (2000) argue that "health inequalities result from the differential accumulation of exposures and experiences that have their sources in the material world." There is small body of Canadian

evidence on racialized health disparities (see Khosla, Ng et al, 2005; Noh and Kasper, 2003; WHIWH, 2003) and a large body of evidence on this from the US and UK (see Keiger, 2001; Lasser, 2006; Kelaher, 2008). While economic and health inequalities vary within racialized groups (by other intersections like gender, class, ethnicity, length of stay, sexual orientation etc), what is at issue here is race/racialization becoming the core basis for reproduction of inequalities.

Researchers from around the world, including those involved in the Employment Conditions Knowledge Network (EMCONET), have been closely examining global level data on employment relations and health; see Sirgist et al (2010) and Quinlan (2003) for a comprehensive review of evidence from around the world on this. Drawing on this evidence, EMCONET researchers have proposed powerful conceptual models to better understand the connections between politics/policies, employment relations and health inequalities. (See Muntaner et al, 2010 and Benach et al, 2010). Drawing on our evidence, we build on the EMCONET models to propose the following conceptual relationship between employment relations and health (see Figure 3.5).
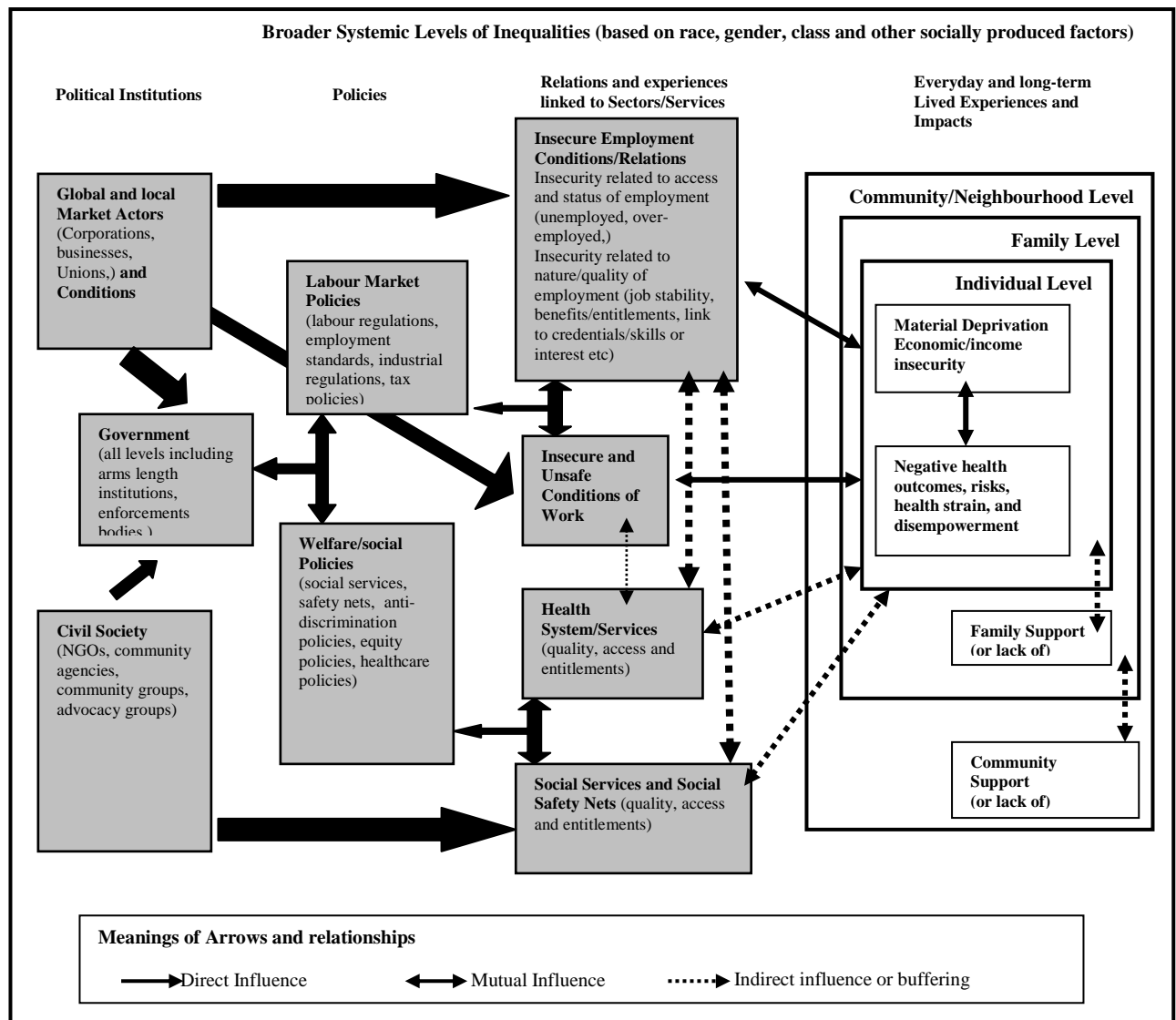


Figure 3.5 Political economy of employment insecurity and health inequalities (Adapted from Muntaner et al, 2010)

Central to this conceptual model is the proposition that in absence of proactive policies grounded on equity and anti-discrimination, historical structures of power and inequalities (based on race, gender, class etc) become embedded and reinforced within dominant relations of employment, income and health. Historically marginalized groups are more acutely impacted by current macro-economic shifts towards precarious forms of employment, flexibilization of labour, and weakening of employment standards, entitlements and protections. The negative impacts (material deprivation, income insecurity, negative health outcomes and health strain, disempowerment) are experienced at individual level in direct and mutually reinforcing ways. While outcomes at individual level may vary by the individual's social position or immediate socio-economic context, persistent and cumulative impacts become expressed as systemic economic and health inequalities at family, community/neighbourhood, and broader structural levels. Social services, social safety nets, and health services may help to counter negative impacts at individual level. However, if these policies/services seek to mirror and promote free-market rhetoric of unregulated competition and efficiency, while shunning equity and anti-discrimination, these services will serve to mask and entrench historical systemic inequalities. This report illustrates how racialization and racialized inequalities are reproduced within and through current labour market policies and social/health policies.

Health status, in turn, is a determinant of employment and income security. Many participants shared about how hand/leg injury, chronic aches, lack of sleep, exhaustion, and depression negatively affects their work productivity and their search for stable employment.

Study results point to important implications for health sector. Health sector practitioners need to recognize that the health concerns and health inequalities faced by marginalized groups cannot be resolved by remedial medical treatment alone but through directly addressing the socio-economic determinants that produce these negative health outcomes and health inequalities. In other words, social determinants of health (SDOH) needs to become institutionalized as the core operational principle within healthcare policies and everyday practice. By exposing detrimental health impacts and healthcare costs of economic inequality (or the reverse relationship produced by equity), health sector leaders are particularly well positioned to become advocates for progressive labour market and social service policies.

## Conclusion

This study has generated insights into the relationship between economic insecurity, poor health and racialization. The survey data finds that, compared to average Canadians, precariously employed, low-income racialized people living in a marginalized neighbourhood are more likely to rate their health as less than good. In the focus group discussions study participants mapped and discussed everyday pathways (physical, physiological, psychosocial and compounding) through which the employment and income insecurities they face result in a host of negative health impacts for them. Results indicate that the prevalent health outcomes of labour market discriminations, employment precarity and income insecurity include mental health issues (stress, depression, hopelessness, addictions), digestive disorders (e.g., ulcers, constipation, diarrhoea), physiological impacts (e.g., fatigue, exhaustion, weight gain/loss, chronic pain), cardiovascular impacts (e.g., hypertension, high blood pressure) and direct workplace injuries. Participants were very concerned about the detrimental impact on the health of their family and children.

The analysis further suggests that protracted economic insecurity, negative health exposures and health strain mutually reinforce each other to produce cumulative, compounding cycles of adverse impacts and health strain towards long-term deterioration in health. The accumulation and compounding of everyday and immediate health concerns like digestive disorders and fatigue can result in damaging acute and long-term health impacts. Conditions of long-term employment insecurity can even undermine people's capacity to take care of themselves and their families.

There is very strong evidence from the US and UK on systemic health disparities faced by racialized groups. Canadian evidence on racialized health disparities remains very thin. Findings from this present study call into question the politics behind the dearth of Canadian evidence on racialized health disparities. There is urgent need for more research on this topic. Moreover, researchers need to unapologetically bring race/racialization in their research design and their analysis. Evidence presented in this report and its anti-racist/anti-oppressive framework can inform future studies.

Study results also highlight that low-income, racialized people are aware that insecure employment and income are root causes of many of their pressing health issues and that these issues cannot be remedied by medical treatment alone. Progressive change can only occur if policy makers, health sector practitioners and service providers from other sectors develop this same critical awareness of the social determinants of health.

# CHAPTER FOUR

# STRATEGIES FOR EMPLOYMENT AND HEALTH SECURITY

## A Critical Examination of Policies and Services

## Introduction

This final chapter examines the strategies that racialized people living in the Black Creek area are utilizing to achieve employment/income security and health, and critically assesses the role of existing policies and services in relation to these strategies. More broadly, the chapter captures how racialized residents and service providers working with these residents are impacted by and responding to the macro-economic shifts (local and global), the political climate, social policy mandates and funding priorities that are increasingly shaped by neoliberalizing trends marked by the rise of non-standard, precarious forms of employment, job outsourcing, the weakening of unions and protective labour standards and the systematic downsizing and marketization of social welfare programs.

A growing body of literature has documented that the very political forces and policy rationale that are expanding precarious forms of employment and weakening employment standards and workplace safety are also clawing back social services and social safety nets. More specifically, neoliberal policy changes over the last couple of decades have ushered in a "new public management" system characterized by punitive and restrictive structures of funding allocation, accountability and control over the "third sector" (social services and social safety programs) (Baines 2004; Clark, 2002; Evans and Shields, 2002; Peck, 2001; Richmond and Shields, 2004; Shields et al, 2005). In other words, social services and social safety (and non-profit agencies) are being restructured to mirror and support market driven models of efficiency and competitiveness rather than as progressive regulatory instruments to counter and transform unequalizing and damaging consequences of market (Clark, 2002; Shields et al, 2005). The shift to targeted and closely ear-marked funding streams, the decline in integrated models of services, the overwhelming focus on meeting quotas and quantity (at the expense of quality), not funding administrative expenses, restrictive eligibility requirements for services and safety nets, "workfare" arrangements are all products of neoliberal restructuring of social services and social safety nets (Clark, 2002; Peck, 2001; Richmond and Shields, 2004 Shields et al, 2005; Yalzinyan, 2007). At the same time, responsibilities of delivering services and the burden of care are being downloaded to local levels/agencies and costs and negative consequences are being externalized to front line service providers without necessarily increasing their decision making power over how these services are designed and delivered (Baines, 2004; O'Brien, 2006; Eaken, 2004; Eaken and Richmond, 2004). This chapter examines the implications of these changes on the strategies and services that precariously employed racialized people use to achieve employment, income and health security.

Community participants were invited to discuss experiences and outcomes of the strategies and services they utilize to find stable employment and achieve income security and health. Service provider participants were asked to respond to resident narratives and experiences and reflect on systemic causes of the economic and health inequalities that racialized people are facing. Both community and service provider participants were invited to assess current macro-economic shifts and to recommend policy solutions for overcoming economic and health inequalities faced by racialized groups.

Results suggest that in spite of utilizing all available mainstream services and supports, racialized residents of the Black Creek area continue to face barriers in getting stable employment they want. Consequently, they experience persistent difficulties in meeting even their everyday basic needs.

In general, participant narratives indicate that the most accessible mainstream services (e.g. resume clinics, job readiness training) contribute marginally if at all to achieving stable jobs and income security. While participants from all focus groups did identify successful programs and services that offer long-term solutions (such as bridging programs, apprenticeships, job mentorship programs and on-the-job training), study results highlight that these programs are not very accessible because of their limited availability, restrictive inclusion criteria and heavier required investment of resources, specifically time and money. Participants from both community and service provider focus groups were particularly critical of the role of Temporary Employment Recruitment Agencies or "temp agencies" in reinforcing exploitative and precarious employment conditions. Perspectives on the role of volunteer work in relation to the labour market appear to be mixed and tenuous; engaging debate emerged from each focus group about the implications of volunteer work, which points to the need for a more cautious approach and for further research. These findings suggest that the majority of existing services may not be effective in overcoming barriers facing racialized groups, particularly barriers rooted in larger systems of inequality and racialized discriminations.

In the absence of effective formal services and support, participants discussed strategies they use to make ends meet, such as resorting to "odd jobs," social assistance, making sacrifices and taking up work outside the formal labour market. They also outlined protective strategies for coping and maintaining hope and health.

Study findings also reveal how service providers in the Black Creek area are impacted by and respond to (1) the growing employment insecurity and poor health experienced by an increasing number of their clients; and, more broadly, to (2) the policy and macro-economic shifts that entrench precarious labour market conditions while weakening redistributive and social welfare programs. Service providers discussed both *operational impacts* on the design and delivery of their services and *emotional impacts* on them. Service providers also shared views about innovative ways and proactive efforts through which they were providing vital supports to marginalized clients in spite of policy limitations and funding cuts.

Community participants and service provider participants provided insightful recommendations for overcoming employment/income insecurity and poor health among precariously employed, racialized people. These recommendations call for (1) changes in how services are planned and delivered; (2) changes to funding/policy structures; and (3) proactive measures to eliminate discriminatory processes and promote equity.

## Results and Discussion

### Types of Strategies

Evidence from the study demonstrates that racialized people living in the Black Creek area utilize a wide array of strategies to overcome the barriers they face in the labour market and to achieve employment/income security and health. Table 4.1 summarizes the different strategies racialized people are using. These strategies are discussed in four interrelated domains: (1) strategies for finding employment; (2) strategies for making ends meet; (3) long-term strategies; and (4) protective responses. Participants shared about exhaustive and strategic use of available government funded employment services. Many talked about being constantly "on the edge" to

use a combination of strategies every day to find stable employment, and to make ends meet and cope because of not being able to find stable employment. Participant narratives also provide interesting initial insights about how family members negotiate and balance family-work responsibilities and develop family-level strategies in response to policy/service limitations and current macro-economic conditions marred by precarious employment. This is examined in more detail in the third phase of our research (to be completed by the end of 2011).

| Table 4.1. Strategies Utilized to Achieve Employment/Income Security and Health | |
|---|---|
| Strategies for Finding Employment | Traditional job search methods (resumes, internet searches, job posting boards, etc.); obtaining accreditation and equivalency for foreign credentials/experiences; approaching potential employers directly; volunteering; networking; job fairs; adapting to the Canadian labour market. temporary agencies |
| Strategies for Making Ends Meet | Taking "survival jobs" and "odd jobs;" relying on "temp jobs" even though they dislike temp jobs; making personal sacrifices (in terms food, housing, basic needs, activities for children); making professional sacrifices (working any job instead of job in their field); accessing employment insurance or workfare/welfare; getting financial help from family; income-earning activities outside the mainstream labour market (e.g., working "under the table") |
| Long-term Strategies | Investing in education and training (English language training, upgrading skills, pursuing another college/university degree in Canada, bridging programs, apprenticeships, internship programs); investing in children's education; developing prudent financial literacy/strategies |
| Protective Responses | Keeping hope; patience; faith/religion; determination; denial of negative impacts; getting involved in local advocacy campaigns |

## *Strategies for finding employment*

As summarized in Table 4.1, racialized residents highlighted that they have made exhaustive use of all available mainstream government and community services related to employment. Immigrant participants discussed how they sequentially access all available mainstream services, often starting with general services like resume clinics, job readiness training (including training on adapting to the Canadian workplace environment), attending job fairs and general job search strategies, and then shift to more targeted job search services and strategic options like networking, approaching employers directly, following up about their jobs applications, job placements, building references and volunteering. Skilled immigrant participants also talked about pursuing Canadian accreditation and equivalency for their foreign degrees/experiences, usually after several months of unsuccessful attempts at getting employment in their field. Friends and acquaintances are also important gateways for findings jobs, albeit precarious jobs since friends and acquaintance were themselves in precarious types of jobs (factory work, hotel work, cleaning etc). Many participants, immigrants and Canadian-born, stressed that they had to persistently resort to temp agencies to find jobs in spite of the temporary and unstable nature of jobs provided by temp agencies.

### Strategies to make ends meet

Since strategies to find work have not resulted in stable employment, precariously employed, racialized people engage in a variety of short-term strategies to "make ends meet." Participants talked about having to resort to "odd jobs," "survival jobs" and "temp jobs" to cover everyday household expenses. Many shared about having to adjust to a precarious lifestyle of juggling multiple part-time jobs and short-term contracts and being "on call" all the time. Participants discussed the ongoing sacrifices and adjustments they have to make in order to make do with insecure and irregular jobs/income. These ranged from creative budgeting strategies to making substantial cuts to household expenses that can compromise food security, housing security, education and extra curricular activities for children, and overall well-being and happiness. Several participants talked about doing "under the table" and "cash" jobs (including childcare for neighbours, catering, selling crafts, cleaning, etc.) to generate income outside the formal labour market. This study has captured only the tip of the iceberg in terms of the role of informal forms of employment and income generation in the lives of precariously employment families. More studies are urgently required on this in ways that expose how the shift towards precarious forms of employment harms the formal labour market itself. Participants also reflected on how systemic barriers in the formal labour market are pushing some residents to resort to illegal/criminal income generating activities to make ends meet. Even a small qualitative study as this has generated more than ample evidence that underscore that stable employment pathways for marginalized groups is the real solution against rise in illegal/criminal income generating activities.

### Long-term strategies

Participants were also aware of strategies that went beyond the traditional job search process and focused on education/training to increase "employability" and overall knowledge and capacity. These were characterized by both community members and service providers as long-term and resource–intensive strategies, since they required higher investments in resources, money and time. Upgrading skills, pursuing another postsecondary degree or academic bridging program in Canada and improving English fluency were identified as long-term and resource-intensive strategies. Some participants shared experiences of using these strategies. Several talked about how one member of the family pursued these strategies while the other member kept doing multiple "survival jobs" to make ends meet. Most, however, talked about barriers in accessing these resource-intensive strategies and programs. Many participants perceived investing in their children's education as a long-term solution and stressed how they try not to compromise on their children's education in spite of the acute financial hardships they face. In other words, many families, particularly immigrant families, view their children as their most vital and often only pathway to income security.

### Protective responses

Participants discussed a range of protective strategies and supports in maintaining well-being and a sense of hope in spite of the odds. Protective and coping strategies included relying on faith/religion, family, community support, getting involved in local advocacy campaigns, as well as personal reconfirmations of keeping hope and being patient. Participants particularly stressed

the importance of emotional support from family, friends and faith and talked about strengthened faith and stronger family/community relationships resulting from these experiences. As mentioned earlier, many participants saw their children as a sense of hope.

## Critical Assessment of Services

Drawing on perspectives and experiences of study participants, this section discusses what is working in existing services, what is not working and what the gaps are in relation to the strategies that precariously employed racialized people are using. Many of the widely available government funded services offer short-term fixes to deeper problems linked to decline in stable forms of employment and racialized economic inequalities. Promising solutions include those that build skills, overcome barriers to stable employment in people's professions, proactively tackle discrimination, and foster collaboration between employers, government, unions and service providers. The role of volunteer work in promoting employment security for racialized groups is unclear and requires further inquiry.

### Short-term fixes

Mainstream job search services, employment workshops and temp agencies offer short-term, band-aid solutions to systemic problems rooted in racialized inequalities and regressive neoliberal shifts towards precarious labour market conditions. Results indicate that, in fact, such services as they are currently implemented may undermine employment security and push people into precarious employment trajectory.

#### Job search and employment workshops

All participants mentioned that they had utilized job search services and employment workshops (such as resume clinics/workshops, job readiness trainings, job interview training, training on adjusting to the Canadian workplace, etc.) since these services are widely available and free. However, study results show that information and skills these services provide appear to be inadequate and ineffective in promoting employability and employment security. Some mentioned that these services helped them to get job interviews but rarely resulted in stable employment. As one participant recounted:

> *I did take a workshop, a resume workshop so I found out how up to date my resume and I am getting lots of interviews. I am getting lots of interviews. But I think what we need is more, like… skills, like things that improve your skills, like training. More training like practical training.* (Participant, Canadian-born FG)

Others stressed that mainstream job search and employment workshops led to unstable and precarious types of jobs that were not in their field. Service providers unequivocally validated community member perspectives that the widely available resume workshops, job readiness trainings and adjustment to Canadian workplace trainings are largely ineffective in promoting employability and job security in the current labour market:

*I've had people come to me and say you know they've gone through all of the different agencies, and all that happens is that they get their resume rearranged. And it's not helping them get a job. The jobs are not there. So that's what the community group is supposed to do. The agency is set up to do resumes, set up to do pre-employment training workshops, work on attitude, character. But it's not specific job skills that are being taught for that particular job.* (Participant, service provider FG – frontline)

*A lot of the things that are available for adults are more employment preparation programs but nothing to really, really get them on the job, paying jobs. And that's what needs to be changed.* (Participant, service provider FG – management)

Community and service provider participants were critical of the patronizing experiences that people have to go through in these job readiness and resume clinic services that disregard existing skills and qualifications, particularly for immigrants with high education. As one service provider commented:

*Also like the newcomers when we, because we like refer them to the employment agencies and they say the same thing, you know when they come back like they show us the resume and interview skills and really not getting the jobs you know. And they just kind of get disappointed and because they're really looking for the job, they want the job you know. And now in these days because they are so highly educated and they know how to make resumes and they know how to you know when they go to the interview you have to talk to the person like with high confidence and they have the courage and they're even asking can you please give me the chance to do the work? I can show you, you know I can do the work and still they're not getting the job.* (Participant, service provider FG – frontline)

These findings indicate that dominant models of job search and employment workshops, while very accessible, are largely ill equipped in promoting employment security for racialized groups. As highlighted in participant narratives, the limitations and problematic nature of mainstream job search and employment workshops lie in the fact that these services are not linked to enhancing skills or creating stable and meaningful employment opportunities; rather, they are focused on restructuring the skills, character and personality of job seekers to what proponents of these services perceive as Canadian labour market requirements. Further, these services do not acknowledge or address systemic discriminations that racialized people face in the labour market.

Study findings about ineffectiveness of mainstream job search and employment workshops raise many questions. Why are such services so heavily funded and widely available? What are the policy/political rationales that justify substantial government funding and resources to such services? What promising services are being cut and compromised to sustain such ineffective services? How can mainstream job search and employment workshops be made effective in promoting employment security? There is an urgent need for policy makers to reevaluate policies, funding and service models linked to job search and employment workshops. Policy solutions need to shift these services such that they become effective gateways for recognizing and building, rather than undermining, people's existing professional credentials and experiences in ways that build stable employment conditions and healthy Canadian economy. Doing so requires more focus on job development (rather than job search and resume clinics), employment/career bridging, proactively advocating against discrimination in the labour market, protecting vulnerable workers,

and promoting stable forms of employment. These services need to be seamlessly and intelligently integrated with settlement services, community development services, health/mental health services, and supported with relevant legal services and anti-discrimination strategies.

### *Temp agencies*

Although temp agencies may allow for rapid access to certain sectors of the labour market, most participants perceived them as ineffective and exploitative. Participants raised concerns about the conspicuous growth of temp agencies in the Black Creek area, saying they play an insidious role in pushing low-income, racialized families onto a precarious employment trajectory. Many participants perceived temp agencies as "scams" that are more interested in maximizing profits for employers and the agencies at the expense of decreased take-home income, rights and benefits for clients. Participants indicated that they felt they had less control over the type of work they did and the career paths they could follow with temp jobs. Others spoke of being treated as a disposable source of labour by these companies. The following quotes capture these negative experiences with temp agencies:

> *[Temporary] agencies don't work... They are pimping you, they are taking $5 or $6 for every hour that you work. That doesn't work for me.* (Participant, Canadian-born FG)

> *I just hope that the agencies and the company will hire us full time not just hiring us for a few weeks then lay us off and then rehire us to avoid the full-time hiring. We need benefits and quality pay through full-time work. Even when we work for six months, we should be entitled for these benefits. (*Participant, Vietnamese-speaking FG)

Service providers also shared "horror stories" from their clients about precarious types of jobs and precarious living conditions created by temp jobs:

> *We hear so many horror stories from our clients, you know, from these temp agencies. Clients would tell us, 'Oh yeah, they called to say there's a job. Come here at 6:00 a.m.' They sit in the office with their, say, hard hat and boots and whatever and just sit there until a job actually comes in. So they waste, like you know, the whole day waiting there, right, and there's no job. But every day they have to do that because just in case a job comes in. If they're not there too bad, right?* (Participant, service provider FG – frontline)

> *In terms of like making ends meet or achieving income security, like the temp agencies is always, always comes up. Like I work in the Resource Centre, a lot of them say okay I went through a temp agency, they found jobs for one or two days, it's very sporadic kind of work, it's very low skilled low end kind of employment… and it's totally not working for the clients at all 'cause they're not gaining. If they are foreign trained they are getting some Canadian experience but obviously that Canadian experience is totally outside of their field.* (Participant, service provider FG – frontline)

Some of the core problems associated with temp agencies that emerged from participant narratives included that: (1) they lead to temporary and irregular/sporadic job opportunities; (2) job opportunities accessed through them are often "totally" outside of people's field and tend to be low skill and low end, thereby contributing to deskilling and de-professionalization; (3) most temp

agency jobs are low paying, and the agencies take a substantial commission, leaving clients with little take-home pay; (4) most jobs through temp agencies offer no benefits; and (5) in some cases people may end up spending many hours and days in temp agency offices just waiting for potential jobs. Some participants also questioned why temp agencies particularly target marginalized neighbourhoods and people. Study evidence calls into question the proliferation of temp agencies and the role of temp agencies in reinforcing precarious, exploitative and insecure employment conditions for racialized people. Equally problematic is the growing tendency of many employers/businesses, including large companies like reputable banks and accounting companies, to hire through temp agencies to (re)produce a surplus of disposable low-cost temporary workers that can be readily hired and fired to maximize profits.

### Debate about volunteer work

Participant views on the role of volunteer work were mixed, and thus there was a very interesting debate on this topic in each focus group. Participants, specifically immigrants, noted that while volunteering was a helpful way to build social networks and get entry-level positions or sporadic contract work, this strategy did not necessarily lead to long-term, stable employment. A few community participants mentioned that they felt misled into believing that volunteer work was a successful way to include Canadian experience on their resumes, only to discover that many employers will not consider volunteer positions as legitimate work experience. Other participants shared positive experiences about their volunteer work and indicated that volunteering has multiple benefits irrespective of whether it leads to a job. Such varied views were echoed in the service provider focus groups. Several service providers were very critical of volunteerism, describing volunteer work as exploitative and as free labour, while others perceived volunteer work as a community-building tool and as a potential stepping stone to career linkages and other opportunities. The following quotes capture this lively debate and the mixed perspectives on the role of volunteer work:

> *When I was home, when I was working at home I used to get very, very depressed and you know can't do anything and then I started going out to volunteer you know what I mean. And I started to reconnect my mind to the outside world, because depression can cut you off from a lot of things and people. So and if you allow yourself like that, you're gonna go way down. So I will encourage people to go out and you know what I mean, volunteer, even if it's just one hour or two hours a day.* (Participant, Black community FG)

> *Volunteerism… it is a big, big issue in my personal opinion. It is like an industry by itself. And I think some of the clients also mentioned during your focus groups previously, that it's a cheap free labour and I totally 100% agree; because why can somebody be employed or taken in as a volunteer and not taken in as a paid worker?* (Participant, Service Provider FG - frontline)

> *I would like to speak on behalf of volunteerism, not that my agency is 100% volunteers -- we're not -- but some businesses, some agencies do not have a large budget so it's for them to get some of their services that they need done in their offices. They need volunteers to come and assist because they do not have the money to pay employees. What does the person coming in get in exchange? They get experience in the environments, they get*

*familiar with what it's like to go into an office every day, what it's like to do, run a photocopier or answer phones. Yeah it may not be, if it's not their, like, where they want to work, then don't volunteer there. I'm not going to volunteer at McDonald's if I want to work at City Hall. I want to volunteer at City Hall, right? So you have to try to volunteer in a place that's going to help you find a job, or give you connections to find a job. So that let's say I'm volunteering at City Hall, I want to work at City Hall, a job comes up, they're more likely to hire me as a volunteer than to outsource.* (Participant, Service Provider FG - frontline)

*So it's always good idea to have a counsellor to guide you, that's the most important thing. Why do you want to volunteer, where do you want to be after? You need some sort of planning.* (Participant, Service Provider FG - frontline)

Overall, participants stressed the need to make sure that volunteer opportunities are not used to exploit people and that whenever possible agencies should build stronger links between volunteer work and employment security. More research and policy review is needed to better understand the role of volunteer work in promoting employment security.

## *Promising solutions*

Focus group discussions with both community and service providers suggest that the most effective services are those that involve collaborations between government, community agencies, employers and trade unions that lead to practical, on-the-job, paid work experience towards stable employment/occupational pathways. These include academic bridging programs (with paid placements), work-study programs, apprenticeship programs, job/occupational mentorship programs, and on-the-job learning opportunities. Pursuing Canadian postsecondary degrees/diplomas, as well as accreditation and recertification processes for regulated professional trades (medicine, nursing, teaching, engineering, etc.) were also perceived as effective steps to securing stable employment. However, many of these services are not readily accessible to participants because of limited space and because of the large investments in terms of time, effort and funds required from anyone who really wants to benefit from them. Although many participants had not been able to access these programs, they knew of friends who had benefited from such programs. The following quotes are examples of positive views of community participants regarding apprenticeship, work-study, going back to school programs, and training opportunities (even if non-paid) that directly result in skill building and employment opportunities:

*Yeah that is true, again the apprenticeships are good, on-the-job training. So yeah there should be more apprenticeships out there.* (Participant, Black Community FG)

*We also need more programs that encourage people to go back to school and stuff like that. More programs that put people back in school like a work-study program where they can do both.* (Participant, Canadian-born FG)

*There are opportunities for immigrants for non-paid training and volunteering. For instance, Corporate Training Readiness Program in Calgary give non-paid work for six weeks. They look at your skills and government pays for it. Many people are absorbed by*

*organizations but these programs are limited. In keeping with the professional qualifications of immigrants more of such programs should be implemented to give them intensive training program. Alongside they should be able to attain experience at organizations and if the organization is happy with their work then upon graduation they can be offered jobs. This makes up for the lack of information that immigrants have about looking for jobs or making resumes.* (Participant, Hindi-Urdu-speaking FG)

Service providers confirmed community participants' positive appraisal of programs like apprenticeships, internships and employment-linked educational pathways. They also provided concrete examples of the success of such programs:

*What is working? Like there's a few programs, like if a foreign-trained, like there's a there's, they need more programs where they are able to get the Canadian experience. Now one, one program that I know of that is that works pretty well is the um there's an Adult Learning Centre called City Adult Learning Centre. They are downtown and they have a co-op program. It is called the Can Ex Program, it is called, the Canadian Experience, and they will actually help the person the participant to find a placement within a company that specifically uh will give the foreign-trained professional experience on the job. So they don't have to necessarily go out on their own to try to get it, they will have support from the school from the co-op program that will go out there and help them find a company, it doesn't have to be non-profit, it could be a profit place, where they are able to get that experience. They can get that on, put that on their resume. And on their resume basically they can say that they have the experience, it doesn't have to say that they were in a co-op. You have to find a way to, to word your resume where it doesn't say that it was unpaid employment.* (Participant, service provider FG – frontline)

These narratives reveal that the programs that work are those that: (1) create direct and meaningful work experiences in people's field and/or in stable occupations and trades; (2) build capacity and skills that strengthen employability, upward mobility in jobs and boosting of resumes (not just rearranging resumes); and (3) involve collaboration between employers, trade unions, government and community agencies to create meaningful job opportunities/experiences that build long-term employment security.

More generally, community members and service providers also highlighted the need for programs that strengthen local economies and create jobs, particularly for marginalized people. The following quote from a service provider provides an example of a valuable local investment program that involves collaboration between government, unions and community, all working to create stable meaningful employment pathways for marginalized youth in the community:

*Another thing I was going to say that I think is uh hopefully going to have good results is a Youth Build Program that the City has been working on in partnership with local trade unions. The City has invested $13 million in the priority neighbourhoods for capital projects, and the goal was that through those capital projects there would be a Youth Build Project so local youth would be hired and trained in the trades to actually do the construction of those projects. And the Painter's Union and the Carpenter's Union have been really amazing partners in that so that youth can get the certification and connections to actual apprenticeship opportunities beyond the Youth Build. So that's been a good, and the other good thing about that is a lot of the youth we work with are youth that have*

*criminal records and the unions will work with people who have criminal records and that's a good opportunity* (Provider, service provider FG – management)

Although participants agreed on the success of programs geared at job creation, bridging programs and apprenticeships, they stressed that there were only a few of these programs available and that there were many barriers to accessing them. For example, many of these apprenticeships and internships are geared towards particular trades or specific groups (e.g., recent immigrants who have been in Canada less than 3 years, people who are under 30 years old, people on social assistance) and may not be available to people who fall outside these groups. Because of limited spaces, even people who do meet the eligibility criteria may not be able to access them.

Skilled immigrants raised concern that accreditation and re-certification for regulated professions can be very stringent, costly and time-consuming; several participants with medical, engineering and teaching backgrounds pointed out that they were not able to pursue accreditation and recertification because of these factors. While recognizing the need for accreditation process, several participants perceived that professional bodies were making accreditation and re-certification processes difficult in order to prevent certain groups of skilled immigrants from entering the field. Other studies have documented the reality that stringent accreditation and recertification requirements force many foreign-trained professionals to abandon their professional line of work and find jobs in areas that are very distant from their professional line of work (including driving taxies, difficult construction work, cleaning etc). Some immigrant participants stressed that they were not able to get stable employment in their field even after having completed the stringent accreditation process.

The cost to the Canadian economy from this jobs-skills mismatch and de-professionalization of skilled immigrants is insurmountable (some estimate put the loss in hundreds of billions of dollars). The social and health cost of this process has been discussed in Chapter 3 of this report and by other researchers. Policy makers and professional bodies urgently need to put an end to this regressive trend by removing barriers and punitive measures in accreditation process and by putting in place supportive services to enable skilled immigrants' transition to stable employment pathways in their respective fields in Canada. The role of professional bodies cannot be limited to screening and barring skilled immigrants to avoid competition within their field; rather, leaders within these professional bodies need to recognize the influx of skilled immigrants as a source for expansion and innovation of their professional field within Canada. Any initial costs to create effective services to overcome job-skills mismatch greatly outweighs the tremendous economic and social benefits that come with having a productive and vibrant skilled labour force.

Academic/professional bridging programs (for foreign trained social workers, dieticians, nurses, etc.) that involve a speedy retraining process with paid internship opportunities were seen as very effective by study participants. However, the limited availability of such bridging programs in a few fields meant that most participants had not been able to access these programs. Participants from community and service provider focus groups strongly recommended for programs like these in all sectors since they had heard about successes in stable employment from such efficient and effective professional bridging programs.

This issue points to a larger systemic problem faced by skilled immigrants in non-regulated professions and what is sometimes referred to as "soft-skill" or "white collar" sectors including in fields like public services sector, government sector, financial sector, retail services, and

administrative professions. Professional bridging programs in these sectors are lacking or minimal and thus this pool of skilled immigrants in unregulated, "soft-skill" sectors may be at highest risk of being stuck in precarious forms of employment trajectory in unrelated fields. There is an urgent need for policy solutions to build effective and efficient professional bridging programs for the growing cohort of skilled immigrants in unregulated, "soft-skill" sectors.

Several participants noted that pursuing a university or college degree in Canada can be very costly and can require several months or years of commitment. One participant, for example, mentioned how he had to use up all the savings he brought from his country of origin in order to pay for educational expenses in Canada. Many of the courses are offered during times when people have to work. The degrees and diplomas that tend to be less costly and can be obtained in shorter periods are often offered by smaller colleges or private institutes; participants who had obtained such degrees and diplomas pointed out that these can carry limited weight in finding stable employment. Moreover, many immigrant participants rightly questioned why immigrants with high education have to go back to school in Canada to get additional degrees. Several pointed out that even after getting another postsecondary or graduate degree in Canada, they had not been able to get a stable job.

These findings reveal that services that are widely available (job search, employment workshops and temp agencies) are largely ineffective in promoting employment security; at best these provide short-term fixes and at worst they push people into precarious and unstable types of jobs. The link between volunteer work and employment security is unclear and tenuous and requires more research. Promising services that seek to enhance skills, promote job security (for individuals and at the community level), develop stable jobs and increase linkages with employers are few, largely inaccessible and underfunded.

## Policy Impacts on Quality of Mainstream Services

Service provider participants identified a number of policy gaps and policy changes that impact their capacity to deliver services that can promote employment, income and health security. These policy impacts relate to gaps/changes in: (1) funding structures; (2) eligibility requirements for clients; (3) deliverable/accountability structures; and (4) models of service delivery.

### *Changes to funding structures*

Service provider participants discussed how limitations and gaps in employment services and other services reflect recent changes in funding structures. They reported experiencing many challenges in obtaining funds for developing effective, flexible employment programs that reflect the needs of their clients. These participants also highlighted that in addition to decreases in the amount of funding, they have limited flexibility in how the funds are used and are more intensively regulated. One service provider participant spoke of how restrictive funding structures force service providers and services to fit funder mandates rather than community needs:

> *Okay, what I think helps for us to have these programs to be more effective, is the fact that when we apply for the grants if the person that we're applying to doesn't put, like I find if*

*they create a lot of limitations on these grants and they sort of, "well we're going to fund you for this" and you've really got to fit yourself into this pigeonhole. But when you once in a while get that grant that opens it up and allows you the flexibility and the freedom to really create a program that will really reflect community needs that allows us actually to do more for the community. So instead of the government telling us this, this, this and this and you're like trying to finagle yourself into like a little, so that you fit the mould. If you're round you just put yourself in a square peg. I would like to be that we're oblong and we can just, just accept us as is.* (Participant, service provider FG – management)

Another participant critiqued the shift to restrictive funding structures that do not accommodate administrative costs or start-up and other hidden costs involved in delivering good quality services; small agencies are particularly impacted by this:

*So it would be nice if they [funders] went back to the other way where they're funding infrastructure and were funding creative programs. Like I would like to see that as opposed to we're not going to fund you dollars for admin, or we're not going to fund you dollars for things to help us set up, because some of the times, especially for other smaller organizations so that they can be included, that helps them, right. So I would like to see us actually go back to some of those other ways that we were doing things.* (Participant, service provider FG – management)

### *Eligibility requirements*

Service provider and community participants highlighted that narrow and strict eligibility requirements for an increasing number of services are a major factor that precludes many people in need from accessing these services. In particular, participants spoke about the fact that precariously employed, working poor are not eligible for a host of valuable services and financial supports that are available for people on social assistance or employment insurance (EI), or who are unemployed. In the words of one service provider participant:

*I think one of the problems we have with our program, and we have a lot of people that come in that are working full time but they are working in jobs where they're making $9, $10 an hour and they can't really support their family in those jobs, so they don't have access to our programs. So we should figure out a way that they still have access to our programs for unemployed, not just for unemployed.* (Participant, service provider FG – frontline)

Several service providers pointed out how newcomers do not qualify for EI and other related subsidy programs because newcomers may not have had opportunities to get stable jobs and gain eligibility. As one service provider put it:

*What else is not working is a lot of programs, the criteria for adults to meet those programs, if they're newcomers. You come to Canada, you're not on EI, you're not on EI reach back so there's a lot of programs that they are not eligible for, so there is no subsidy for the employers to hire any EI or EI reach back that are newcomers because they have never worked in Canada to ever apply for it. So a lot of newcomers come into our centre and first thing is, oh they're not between 15 and 30, so none of the youth programs work*

*for them. Okay so they're not on EI or EI reach back so none of the subsidy programs work for them, right? So there, it's very limiting.* (Participant, service provider FG – management)

At the same time, non-recent immigrant participants mentioned that they are not eligible to participate in programs that they perceive to be good, especially bridging programs, because these tend to limit access to very recent immigrants. Community participants, including Canadian-born individuals, criticized how certain groups like refugee claimants and non-status people are excluded from most services and legal protections that can prevent them from being exploited in the labour market.

Eligibility issues were also raised with respect to the growing number of youth-focused programs in the Black Creek area at a time of declining programs for adults and families. There was an interesting and engaged debate regarding services for youth versus those for adults. See Box 4.1 for a synthesis of this debate. In general, all participants were critical of policies that pit one group against another, and of policies and funding that blindly follow what is "sexy."

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**Box 4.1 Debate on Services for Youth versus Adult**

Participants mentioned that there has been a marked increase in programs geared at youth in the Black Creek area, including programs focused on increasing employment opportunities for youth. While acknowledging the importance of youth programs, some participants were concerned about whether this was happening at the expense of funding and support for adults. In the words of one service provider who has worked in programs for both youth and adults:

> *I used to work at Youth Services for [name of agency] for like 7-8 years, now I've moved into the adult section, and it's great that we've been hearing all about this and all the great youth programs. One of the strategies that is not working is the government is putting so much money into youth programming and subsidizing youth apprenticeship and everything, but making ends meet it needs to be the adult first, you know. I mean all of the programs for adults does not give them any immediate income, it doesn't give them any immediate security or jobs or anything. Whereas there is so much money for employers to hire youth, right? Money is thrown to the employers to say "hey hire youth", but when you go into the adult program it is all about oh we'll prepare you, oh we'll help you this we'll help you that but there's no money for the employers [to hire adults]. And so I think you know, I mean I love hearing about all the youth programming because I've been in that for so many years, but you know when I'm looking at these questions where we're talking about making ends meet, achieving income security, I think right now that really falls on a lot of the adults having to support the families, right?* (Participant, service provider FG – management)

Several providers critiqued how policy makers and funders sometimes follow what is "sexy." Currently youth is considered sexy. This can occur at the expense of what is needed or of a more integrated approach:

> *I think one of the one of the problems too is what's sexy sells, and so part of it is that you know like youth became sexy kind of issue so that was all that kind of the focus around*

*that. I mean similar but different from you know child poverty. There is a reason the kids are in poverty; their families that are in poverty. So look at the whole system versus just you know pieces of it.* (Participant, service provider FG – management)

One service provider mentioned that in terms of employment programs, the need was clearly greater among adults than youth:

*I work with the Job Connect Program and our program is divided for youth and adults and I'll just give you an idea: we have to see 1,200 youth a year and 200 adults a year, and right now for youth we're only sitting at maybe 60% of our intake, like we're only able to achieve that. But if I could, and we've tried, to fill that gap with adults we'd have no problems hitting the targets.* (Participant, service provider FG – management)

Towards the end of the discussion, there was some consensus among service providers in favour of programs that were more integrated and family focused rather than ones that pit one group against other. The following quotes reflect this consensus:

*So like the adult programs, like finally a bit of money is being released onto the adults from the Job Connect where all these years it's always been youth focus, right? And the government, they have to just quickly make decisions and realize that you know what, if we don't support the adults how are they going to support their families, right?* (Participant, service provider FG – management)

*I fear sometimes that the policy will just like become a pendulum, okay youth's been hot now let's go to adults and then youth are going to be in the same boat they were in before which lead to the focus on youth, right. [general agreement] So just to sort of say like it doesn't mean to take, you know take from this to give to that, it means there's a gap here you know.* (Participant, service provider FG – management)

### *Deliverable/accountability structures*

Service providers were very critical of policy/funding shifts that reflect a greater preoccupation with quantity and number at the expense of quality of services. Participants indicated that government pressure to increase the number of clients or to meet particular quotas prevented service providers from offering holistic and quality services reflective of the needs of clients. The "numbers game" and strict directives about the amount of time to be spent on each client can prevent service providers from fully understanding the needs of clients and providing the full range of supports that is actually required. The focus becomes "rushing" through as many clients as possible. This critique is captured in the following quotes:

*They [government] are so focused on get the number, get the number, get the number... how can you get the number when I still have this person who still requires my help who's coming to the end of the year, I know that I've got to meet these requirements. Like they try to constantly fit the oblong or the star into the square peg and it just doesn't work. And there's these time limits on it and there's also these number requirements that sometimes*

*they are not feasible. And then on top of that I find that for a lot of the employment programs is that many times you started off initially maybe at 150, you know well maybe we've got to push it up to like 170, 180, 200, 250. And it's just a whole number's game.* (Participant, service provider FG – management)

*Like it, it just for me doesn't make sense. You're rushing individuals through and we need to get away from the numbers and focus more on the service and, and the individuals so that it works for them.* (Participant, service provider FG – management)

*I am limited because of the time limitation that has been given to us as service provider during our one-on-one counselling meeting.... because of funder's requirement you are not supposed to go beyond a certain time limit for counselling with any one client. I usually go beyond [giggle] I always go beyond actually, not usually, always go beyond the time limit. But I feel that I'm breaking the rule but for the sake of a better service I always do go beyond the time. So that is one of my barriers that I feel hampered with.* (Participant, service provider FG – frontline)

Several service providers emphasized the contradiction in government policy/funding structures that tend to prescribe (and fund) interventions that deal with issues in isolation when client needs are always complex and interlinked. As one service provider working in the employment sector pointed out, it is very difficult to address only employment issues.

*We're supposed to provide all kinds of counselling within that short time frame which I found very, very limiting to me, because it's not just employment. When, when you're facing a client, it's not just employment counselling, because when you are talking certain other issues come up as well and you cannot just ignore those issues and tell them okay we are not going to talk about this, we are going to only talk about this, because it's a holistic issue for the client and we need to deal it as a holistic issue, not ignore some parts and only deal with this part.* (Participant, service provider FG – frontline)

## *Models of service delivery*

Participants from community and service provider focus groups also discussed potentials and limitations in different models of service delivery. Overall, participants were critical of policy/funding structures that: (1) don't allow for more integrated models of service delivery (i.e., focus on one issue/intervention without reference to how this issue is linked to other issues); (2) pit services for one group against those needed for another group; (3) push community agencies to compete against each other for limited pots of funds rather than encouraging them to work together; (4) lack coordination between different levels of government; and (5) prevent service providers from offering the quality services that they would like to and/or are capable of offering. The following quote highlights the need for flexible service models that can "meet families where they are at":

*I also believe that with regards to grants, we need to meet families where they're at instead of trying to develop some other new thing to fit into. More holistic services. So for example government, they'll provide funding for employment. Well with employment and this person*

*walking through the door, there are also going to be issues with other mental health. Maybe it's child care, maybe it's, I don't know what the issues are coming through, but we need to come together so that we can address the individual or the family as they come into us, instead of saying sorry this program only deals with whatever it is.* (Participant, service provider FG – management)

Many service providers working in the employment and settlement sector emphasized the increasing complexities of the issues presented by their clients. One service provider spoke about how they have to deal with many other issues (including mental health and food security) before they can get to the employment issue:

*Yeah because like we don't want to turn anybody away. So before when we used to be focusing say you know 80% on employment assistance and maybe 20% on everything else, right? Now it's like you know we're, we've got much more need now to help them with all of their other barriers before we can even get to the employment piece, right? So now we're sitting down with them more just to find out okay what sort of mental problems they have, try to figure out where they can get their next meal. So we're referring so many more people to food banks and other. I mean it's incredible, everything that my staff is having to learn and having to be more resourceful.* (Participant, service provider FG – management)

Another management-level service provider discussed the need to spend more time with clients and to see them repeatedly in order to provide quality supports that can meet their multiple and diverse needs. Within this context, she questioned "cookie-cutter" approaches of policy makers/funders that focus on single intervention outcomes or assign a fixed time limit per client.

*It is hard because usually funders take this cookie-cutter approach, so it is hard to convince them that client needs are more important than just looking at that. So we have had experiences like that where with our settlement services, [inaudible] based on all these, the settlement clients have more emotional issues now so the settlement workers have to see them again and again…And also talking from my position, like I'm in middle management, so based on what I find, like my staff they want to do more, they want to spend more time and take this holistic approach. But again in my position, again the numbers are an issue and also when the staff are spending this amount of time with a client, then again I am accountable for that. So that puts me in a very tricky situation because of course they want to work more with the client because they know the client needs have to be met and they cannot just say your file is closed your time is up. But again we had to look at the funder needs too; that seems to be a challenge.* (Participant, service provider FG – management)

More broadly, participants called for better coordination and collaboration between community agencies in order to work together to address issues at the community level, rather than competing for the same funding.

*Instead of looking at all the problems and the barriers that people are facing, we should look at what we do have and community groups should work together…instead of fighting for the same funding pot, but get together and say you know this is what we wanted and stick to it instead of saying this is my pot you know and, and showing how much problems*

*is in this community so that we can get the funding.* (Participant, service provider FG – frontline)

In order for this kind of cooperation to happen, participants underscored the need for better collaboration and coordination between and among different levels of government such that services and resources could be linked to offer more integrated, holistic services. For example, service providers highlighted the urgent need for more institutional collaboration between the employment and settlement sectors. Several service providers also emphasized more than once the need to bring in health (particularly mental health) as an integral component of settlement and employment services.

## Impact on Service Providers

Study findings indicate that service providers working closely with precariously employed, racialized communities are also being negatively impacted, both professionally and personally, by the worsening economic security and health of their client groups. Many service provider participants shared about the emotional toll this has taken. Service providers used functional terms like "vicarious trauma," "compassion fatigue" or the "vortex of hopelessness" to describe these emotional impacts. These feelings were also attributed to their perception that systemic change is slow moving and the impacts of discrimination, particularly systemic racism, are overwhelming. The following quotes capture these difficult sentiments:

> *There's a technical name for it, vicarious trauma or compassion fatigue, you know is uh something that uh we in the in the in the service industry sometimes we have to be uh cautious of. Especially you know in uh, uh when you get into the double-digit years and it's you, you know you, it's uh somewhat daunting, two steps forward three back kind of kind of mentality, so.* (Participant, service provider FG – Management)

> *I don't know [inaudible] that we get we get drawn into the vortex of hopelessness that a lot of the community experiences ...that we are part of it now and we get pulled into that. When, when and I speak I, somehow I feel I shouldn't talk about youths but that's all I do are the youths, they speak of the hopelessness that they feel and I think as workers we feel. I feel sometimes some of that hopelessness. It's like, what am I doing? And then you, you, you reflect again and you say okay we can only do one at a time and, and let's go forward.* (Participant, service provider FG – Management)

Other service providers who have been working in this sector for long time spoke about feeling disillusioned because the problem of racialized inequalities has remained unchanged for decades.

> *For somebody that has been working for the last 25 years in a solidarity role with racialized communities, I am feeling tired and a bit jaded. It feels in some ways, and I know there has been some changes you know, some of the issues that were there 25 years ago are still there...Well one of the things when I was thinking about this, you know Tracey Chapman's song, "Poor People Going to Rise Up and Get Their Fair Share." And you know I just hope I hope and I hope that some day that we can live in a society that we are*

*not having to gather around a table like this and talk about these issues.* (Participant, service provider FG – management)

Frontline service providers talked about the challenge of maintaining a work-life balance when the needs of client are very "taxing" on them and often require them to work harder and longer hours. The following quote captures the dilemma frontline workers face when balancing the need to take care of themselves (including relaxing and rejuvenating on their days off) while trying to provide quality services to their clients that may require being open after hours and weekends:

> *I just wanted to add onto the after service opening on Saturdays or later than 5:30. I know personally, if we are trying to achieve as service providers, well we need to take care of our emotional health, our families, our mental well being especially when we deal with you know clients that, that do have these issues. It is taxing. I can speak for myself or some of my colleagues, that it is taxing on us as well. So to do it let's say maybe once a month Saturday or not on every Saturday would be sufficient. But most agencies don't want to work on a Saturday because we too need to rejuvenate. We need to replenish our mental health and our emotional well being. And not that we don't care about our clients but how effective could we be if we don't take care of ourselves first and then take care of our clients.* (Participant, service provider FG – frontline)

Service providers, particularly frontline service providers, suggested the need for more appreciation of the hard work that they do and for more supports (like gym memberships) that could help them to "replenish" themselves and ensure their own well-being.

> *I think as service providers we need to focus more on our organization needs to focus on appreciating the work we do because there is not a lot of commendation for any of the work we do. We work hard. I don't know if some of the organizations throw parties or whatever, just you know a token of appreciation would be nice. And something for to keep us in our jobs, focusing on our well being, our emotional health, like gyms, you know memberships any, any of that sort of thing to keep us, you know, replenished. Because our jobs aren't easy.* (Participant, service provider FG – frontline)

## Services Provider Responses to Gaps in Policies and Services

In spite of multiple funding/policy barriers, several service providers have developed innovative programmatic responses to gaps in programs/services. Some service providers talked about creative ways in which they continue to offer integrated services to their clients even though policy makers and funders are more concerned with single, isolated outcomes. Several participants openly shared that they spend more time per client than dictated by policy makers/funders. One service provider described an innovative pre-migration mentoring program that her agency had started to offer to potential immigrants before they come to Canada so that immigrants have realistic information about the Canadian labour market and can come better prepared. She noted that her agency offers this service in spite of the difficulties in obtaining funding for such a program. Another service provider from the management level spoke about how she succeeded in convincing a funder of the growing complexity of clients' needs and had negotiated a decrease in her agency's client quota requirement to accommodate more time and multiple visits per client.

*Because we have seen an increase in the amount of time that we have to spend with each individual to help them more, I was able to negotiate with my funder to decrease our numbers. So when we used to have like 550 new clients that we had to see every month, I was like there's no way we can see that many new clients every month and, and assist them to the best of our abilities, especially now that you know on average we see each of our clients about 16 times on average. Whereas before the number was less. So I was able to decrease our numbers to like 320. So I was able to negotiate with my own funder. But I wasn't able to negotiate like you know getting more staff or anything, but at least I was able to show them that look, you can see that we are seeing the same clients because they've got much more barriers and they need more support.* (Participant, service provider FG – management)

Others gave examples of successful models of integrated, family-centred programs in the community, like the Investing in Families program focused on single mothers.

*Investing In Families is an initiative by Toronto Employment and Social Services where they have launched an integrated approach to service delivery with other city services - primarily Toronto Parks, Forestry and Recreation Department, Toronto Children Services and Toronto Public Health. It is an integrated approach in the sense that we have done outreach targeting single mothers in the Jane-Finch community, who again have traditionally not availed themselves of these programs and services. Based on the premise, some research that was done years ago whose study indicated a lot of single mothers are suffering from depression. And so this seeks to address that somewhat and also to address the needs of the children. If you have a mother who is suffering from depression, obviously it's impacting the children, it's having an adverse effect on children ...So what it involves is various representatives from each of those departments I've mentioned, going out and doing home visits. So for example a recreationist from Toronto Parks, Forestry and Recreation would go out and meet with the kids and see what are their interests, what are they interested in, and sign them up for whatever appropriate recreation program exists. They would be connected with a nurse from Toronto Public Health who would work with them and make necessary referrals for them to get the necessary mental health counselling that they need, and with Children's Services as well in terms of providing day care. And we've had quite a lot of success with this initiative* (Participant, service provider FG – management)

The key to the success of the Investing In Families program is thus attributed to the model of multi-sectoral collaboration that brings together several agencies to offer integrated services to both mothers and children.

Many service providers pointed out that depression and other mental health issues are very prevalent among economically marginalized communities and stressed the importance of addressing mental health as an essential part of promoting employment and income security. In the words of one participant:

*I go out now to see my clients in their homes, so I'm learning more about who they are, the issues that are affecting them. Depression is very great, off the scale. There is a lot of issues that you know self esteem. When all these things are lacking then it is going to be*

*more difficult for someone to secure employment as well as maintain employment. So there is a whole host of reasons why sometimes people get jobs but then they are not able to keep them.* (Participant, service provider FG – frontline)

Another participant echoed this point and outlined a local initiative to establish a hub for mental health issues.

*I think that there's a lot of other issues that need to be dealt with sort of first. Like the, the majority of, well a lot of people in the area have serious mental health issues and food security issues and poverty issues in general and I think that until those kinds of things get dealt with first long-term sustainability of a job is kind of hard to do when you have these kinds of more pressing issues. So one of the things that we have been doing in conjunction with other agencies is that we are in the midst of trying to start a hub at Driftwood Community Centre for mental health issues.* (Participant, service provider FG – frontline)

The importance of building direct links with potential employers was highlighted by many service providers as a necessary and effective step for expanding job opportunities for those who have faced barriers in the labour market, particularly newcomers to Canada. One service provider shared about how he proactively tries to build relationships with potential employers and tries to convince them to hire newcomers.

*Like we have so many factory jobs and things like that. And I just build the relations like calling the employers and saying you know we really working for the people and these people, if you don't get them out they won't get the Canadian experience. Because most of the people say sometimes even the receptionist they just send them back without listening or anything, and they don't let them to make any appointment with the supervisor or anything. So I do go with them and then I yeah speak on behalf of them and then we get [jobs].* (Participant, service provider FG – frontline)

Another service provider described how, in the absence of adequate government action and incentives for employers to create good jobs, service providers have to step up and fill this role of liaising with employers for job development.

*I mean on a good note I wanted to say was even though there are a lot of restrictions with the funding and stuff, now a lot of the responsibilities has fallen on service providers to you know liaises with all the businesses and stuff, right? And I don't know about most of the other service providers but I know, ourselves, we have really put a big focus now on job development and employer relations because we recognize that because we're not getting a lot of the support from the government you know to give employers incentives we have to go, approach employers and try to build that relationship you know on our own, right?* (Participant, service provider FG – management)

These innovative and bold initiatives by service providers, including multisectoral collaboration, integrated, family-oriented services and stronger linkages with potential employers, represent sources for broader policy change that can promote employment, income and health equity.

Findings from this study add to the growing body of evidence about the damaging impacts of neoliberal restructuring of services and social safety nets (see insightful studies by Baines, 2010;

Clark, 2002; Eakin, 2004; Eakin and Richmond, 2005; Peck, 2001). Evidence show that existing employment related services (and the rise of temp agencies) lead mostly to short-term fixes that may push people into precarious jobs and employment insecurity, rather than enable them to overcome them. At the same time, other social services (settlement, health, community development program etc) and safety nets are being reconfigured through market-oriented models of accountability and efficiency structures in ways that undermine integrated, quality and effective services and programs that can promote employment, income and health security for marginalized families. Local service providers have to bear the externalities and costs of these regressive policies and funding regimes on the one hand and the deteriorating economic and health concerns faced by their client groups. Eaken (2004) has shown that government funders are consistently under-funding service agencies by at least 14%.

The intricate relationship between politics, policies, services, service providers and participant/client strategies is illustrated in Figure 4.1 below. As depicted in the figure, the current policy and service model results mostly in short-term fixes that reinforce employment insecurity and force many people to resort to informal strategies and sources of support.
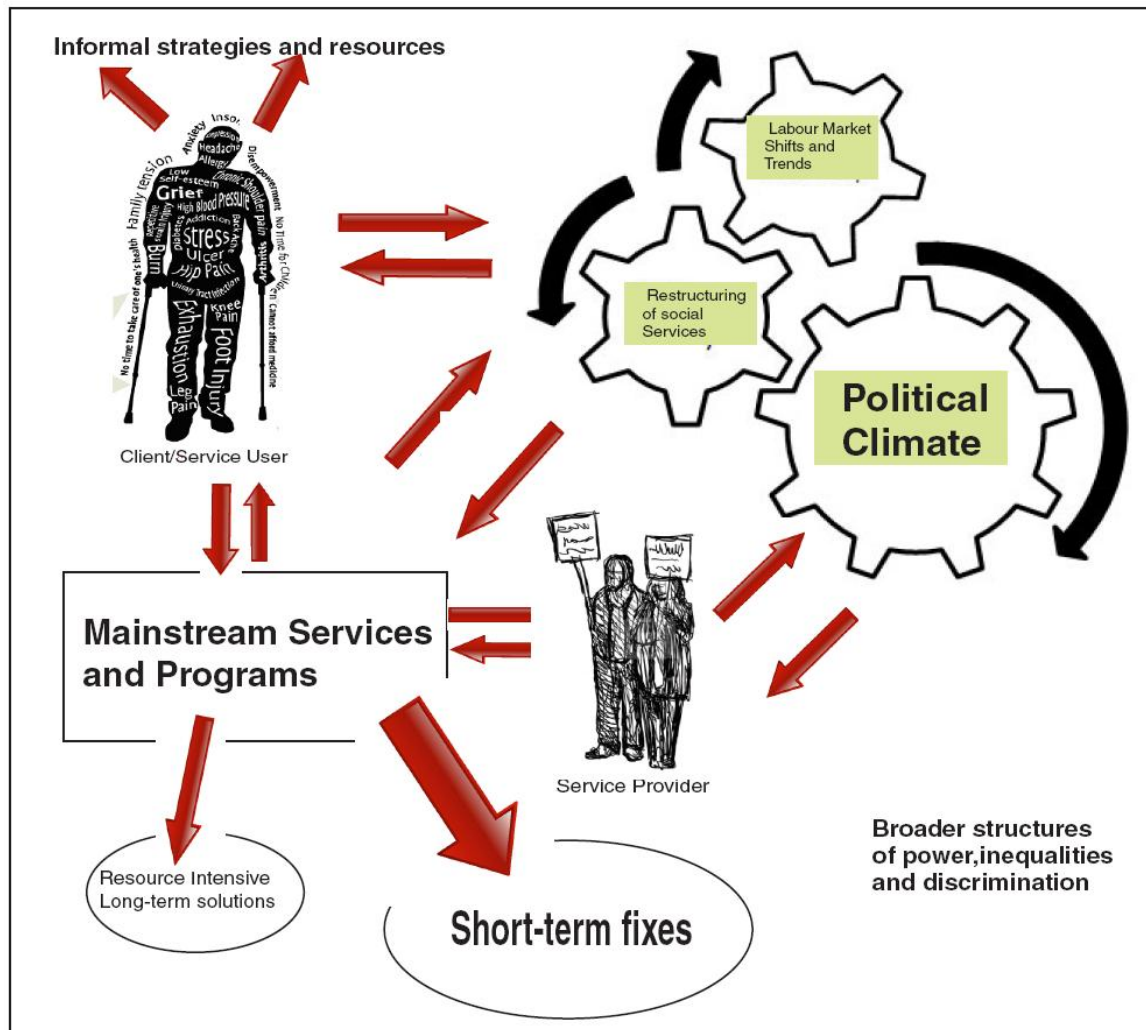


**Figure 4.1 Relationship between policy and services in relation to strategies utilized by racialized working families.**

Clearly missing in current policy and service systems are any proactive initiatives and formal recourses to address and overcome racialized discriminations and inequalities.

## Conclusion

Study findings indicate that the majority of the mainstream and widely available employment related services (in particular, resume/interview workshops, job search services and job readiness programs) are largely ineffective in enabling people to get good, stable employment in their field. This is because these programs contribute minimally to building relevant skills and employment links and to overcoming systemic barriers that racialized people face in the labour market. Programs that are perceived as effective in building employment security are those geared towards building skills, creating employment opportunities and bridges and fostering collaboration among employers, unions, governments and community agencies. Some of these programs, such as apprenticeships and internships, are few and also have strict eligibility requirements and are thus not very accessible. Stringent accreditation and recertification requirements also preclude skilled foreign trained people from entering their professional field of work and push them onto a precarious, survival employment trajectory. Skilled immigrants in unregulated, "soft-skill" professions (including service sector, administrative sector) have little or no professional accreditation and bridging services that can enable smooth entry and stability in their field of work. While participant views on the role of volunteer work were mixed, many participants highlighted the need to make sure that volunteer opportunities are not used to exploit unemployed and underemployed people.

The study has also provided evidence on how the increase in economic insecurity and poor health among racialized groups is impacting service providers working with these groups. Service providers revealed the professional and emotional stress resulting from this situation. Employment agency staff discussed how they have to try and address many other barriers faced by their clients before they can address employment issues. Service providers also criticized the shift towards more restrictive funding and accountability structures on the part of government and funders and pointed out how these structures prevent agencies from offering the high quality, integrated services that are crucial to overcoming the multiple, complex issues faced by their clients.

Recommendations from community members and service providers include a call for changes in service planning and delivery towards more a family/community centred approach (in employment services as well as health and community development services); changes to funding/policy structures to include more flexible funding and program eligibility systems and cross-sectoral collaboration to avoid policy/funding overlaps; and recommendations for proactive measures to create stable forms of employment, eliminate discriminatory processes in labour market, and promote equity.

# CONCLUSION AND POLICY RECOMMENDATIONS

The results of Phase 2 research conducted by the ISRH research working group uncover the intricate relationship between racialized inequalities, employment/income security and health within the context of neoliberalizing trends towards precarious labour market conditions and restrictive and punitive social services. Crucially, findings from this study adds to the small but growing body of critical evidence showing that the Canadian labour market is highly racialized and "colour coded" and that access, type and quality of employment is segemented along ethno-racial lines (see Block and Galabuzi, 2010; deWolff, 2000; Galabuzi, 2006). Participant narratives illustrate how racialized groups face multiple systemic barriers and discriminations in achieving employment security in the current climate and the compounding adverse impacts from these experiences on their income security and health.

This study has also captured how place-based stigmatization and discrimination can further exacerbate the employment and health inequalities faced by racialized residents living in low-income, marginalized areas like the Black Creek area. At the same time, this study has highlighted the critical agency among precariously employed racialized people as witnessed in the ways they make exhaustive and strategic use of services and supports to find stable employment, make ends meet, maintain hope in spite of persistent barriers to employment security, and resist through local advocacy. Gaps and effectiveness in existing policies and services have been assessed within and through these strategies that precariously employed racialized people utilize. Service provider perspectives have provided further understanding about restrictive policy and funding structures that prevent them from providing holistic and integrated services geared at promoting employment security and health.

In summary, the key findings from this study include:

1. Racialized people (immigrant and Canadian born) face numerous systemic barriers in the labour market that preclude them from getting good, stable employment in spite of exhaustive use of existing services.
2. Systemic discrimination is a predominant factor that undermines racialized people' access to stable employment, job-skills match, fair wage, workplace safety and job security. Formal recourse for racialized people to file complaints about or counteract systemic discrimination that they face in the labour market appear to be lacking or inadequate.
3. Racialized immigrants face stringent and persistent barriers in getting their credentials and experiences recognized. In absence of effective professional bridging programs and unavailability of stable employment opportunities within ones field, many racialized immigrants are at risk of being chronically stuck in precarious types of employment that are completely outside their field. The nebulous "Canadian experience" requirement imposed on skilled immigrants by professional bodies and employers masks a tacit practice of racialized xenophobia within Canadian labour market at insurmountable cost to the Canadian economy.
4. Current employer strategies of creating precarious types of jobs, denying benefits and professional development opportunities, not following workplace safety standards and hiring through temporary employment agencies produce long-term employment insecurity for workers; failure of policy makers and employers to implement employment standards and anti-discrimination policies result in racialized workers facing precarious jobs, workplace discrimination, employment insecurity more acutely.
5. Place-based stigma and discrimination that racialized residents of the Black Creek area experience appear to further undercut their opportunities and access to good, stable

employment pathways; systemic racial profiling and criminalization of racialized youth in Black Creek have long-term negative impacts on employment security and health for these youth and their families.

6. Labour market barriers, persistent negative outcomes in spite of using all available strategies and services, and prolonged conditions of precarious employment are resulting in compounding adverse impacts and health deterioration for racialized people (at individual, family and societal level).

7. Services that are widely available (job search, employment workshops and temp agencies) are largely ineffective in promoting employment security; at best these provide short-term fixes and at worse they push people into precarious and unstable types of jobs. Promising services that seek to enhance skills, promote job security (for individuals and at the community level), develop stable employment, and increase linkages with employers are few, largely inaccessible and underfunded.

8. Current structures of efficiency geared and market-oriented funding, accountability and management of social services and social safety nets preclude service providers from providing high quality, holistic and integrated services to economically marginalized people that can promote economic and health security.

Community and service provider participants put forward many concrete policy and service recommendations. Common recommendations by community participants included the following:

- ✓ Affordable and accessible daycare
- ✓ Employment agencies should help people get jobs and not just prepare resumes
- ✓ Timely and appropriate recognition/accreditation of foreign credentials
- ✓ Recognition of foreign experience
- ✓ More academic/occupational bridging programs
- ✓ More paid internships and apprenticeship programs
- ✓ Require temp agency jobs to provide benefits and decent pay
- ✓ Lower tuition and more scholarships for children
- ✓ Loans and subsidies for immigrants to study and gain skills
- ✓ More help with starting small businesses
- ✓ Better programs to improve English language skills
- ✓ Overcome information barriers pertaining to the labour market
- ✓ Programs for older people to get training and reenter the labour market
- ✓ Eliminate discrimination in the labour market (and in general)
- ✓ Supports and services to deal with stress and other health issues
- ✓ Access to extended health services including prescription drugs, dental care, eye care, physiotherapy, massage therapy

Recommendations by community participants reflect both everyday needs as well as call for systemic change. Recommendations put forth by service providers mirror those of community members. Further, service providers provided valuable policy recommendations that can enable providers to deliver integrated, family-centred models of services capable of promoting economic security and health:

- ✓ Promote a more integrated, holistic service model that promotes employment security and proactively addresses health/mental health, food security and other related issues

- ✓ Take a more family-centred approach (rather than focusing on youth or children alone)
- ✓ Funding/accountability structures should be focused on quality, not quantity
- ✓ More collaboration between and within different levels of government
- ✓ More collaboration between community agencies to focus on community issues (rather than competing for the same pot of money)
- ✓ More collaboration and linkages between government, non-profit agencies and potential employers to create good, stable jobs and to hire newcomers to Canada
- ✓ Recognition of foreign credentials and foreign experience
- ✓ Better policies to ensure that volunteer work does not become exploitative
- ✓ More on-the-job training, internships, apprenticeships and bridging programs
- ✓ Focus on job creation and connecting people to jobs and not just on resume workshops and job readiness training
- ✓ More supports for service providers to reduce workload and address "vicarious trauma"

Conceptually, findings from this study highlight the need to go beyond jobs to employment security and beyond poverty to income security. Unlike "jobs" and "poverty," employment security and income security are concepts concerned not with numerical figures (e.g., amount of money per individual/family) but rather with the quality and conditions of jobs and income that can enable people to live stable, worry-free life of health and dignity. Policies that are preoccupied with creating jobs irrespective of the quality and stability of the jobs can aggravate employment insecurity. The fact that a large proportion of new jobs being created currently are temporary types of jobs needs to be questioned. Similarly, the overwhelming focus of many policy makers on tackling poverty by simply injecting money amounts to a band-aid solution to what is a deeper socioeconomic problem of inequality and injustice.

The findings from this study indicate that poverty is not the only thing making us sick. Employment insecurity (unstable, precarious and exploitive employment conditions) and income insecurity caused by these bad jobs are equally or more damaging for health. The social, economic and health/healthcare costs of these regressive outcomes from precarious forms of employment are insurmountable and intergenerational and greatly outweigh any short-term benefits to employers or the Canadian economy. History has plethora of hard earned lessons that show that policy makers and employers (private and public sector) need to adopt long-term vision to understand the "fundamental contradictions" and fatality in reproducing economic insecurity, vulnerability and poor health among working families in the name of cost saving, competitiveness, efficiency and innovation. Proven forms of efficiency, innovation, and productive competition comes from creating secure and healthy work force (and through the rich knowledge and skills that immigrants bring) and not from reproducing precarious types of employment and inequality.

In the absence of proactive employment equity and anti-discrimination measures, racialized inequalities (and other historical inequalities) will continue to worsen, particular in the context of current shifts towards precarious forms of employment. This argument is poignantly captured in the following two quotes, one from a community participant (quote repeated from Chapter 2 for emphasis) and one from a service provider:

> *It is so true, it's exploitation. I feel like it is legalized slavery, I've been in an environment where we were standing on an assembly line, packing and it was just the worst position… it was unbearable and there were people old enough to be my father and mother over there… it is the working conditions, they are horrible. And how they oppress you because you are a*

*person of color… it goes back to other systems of inequality and that we've been talking about for 100 years. Things will never change. (Participant, Canadian-born FG)*

*Back to what you were saying as far as, part of the difficulty is the labour market and the issue that you know last to be hired and first to be fired is still true today and I think part of it with the kind of the economic situation for a lot of companies, employment equity kind of flew out the window, and then it became this excuse, well we can't do employment equity because we're in this economic downturn. Well I say that's bullshit. (Participant, service provider FG – management)*

Immediate policy solutions are required that have the proven ability to promote employment/income security and health for racialized people by proactively overcoming racialized barriers and discriminations in the labour market and, more broadly, by reversing the shift towards precarious employment conditions. This cannot be achieved through small, incremental reactive policy responses to individual, disparate incidences. Nor can be achieved without intelligent cross-sectoral collaboration and integrated policy solutions across labour market, healthcare, and social services sectors. What is required is a sea-change, a paradigm shift in which equity and anti-discrimination, and not free-market rhetoric, becomes the core operational basis and indicators for effective public policy development.  While this call for paradigm shift is hardly new, the accentuated levels of present inequality, socio-economic polarization and systemic discrimination underscore the exigency of the need for this shift in the current context. Historical evidence unequivocally indicates that equity and society free of discrimination is good for health and good for business and economy. While the political onus for this is firstly on policy makers, all stakeholders have a role to play in mobilizing this paradigm shift. Business leaders, sector leaders, and management staff of community agencies need to stop the insidious decline of stable and secure forms of employment within their organization or sector. Media and researchers can document and build public knowledge about the benefits of promoting equity and anti-discrimination (eg benefits and need for hiring immigrants).

A number of progressive community agencies and advocacy coalitions have been working steadfastly to put forth cross-sectoral policy recommendations to promote employment and income security for working families. Over the coming year, Access Alliance has committed to a grassroots policy development process in which we will review and build on policy recommendations put forth by study participants as they relate to policy recommendations suggested by other agencies and coalitions. In particular, we plan to build on policy solutions put forth by the following agencies and coalitions: Color of Change campaign, Modernizing Income Security for Working-Age Adults (MISWAA), Workers Action Centre (WAC), Canadian Centre for Policy Alternatives (CCPA), Jane and Finch Action Against Poverty (JFAAP), Income Security Advocacy Committee (ISAC), and Mennonite New Life Centre's Newcomer Advocacy Group (MNLC). The policy recommendations from each of these agencies or coalitions are promising because they are geared at proactively tackling the root causes of systemic employment insecurity and racialized inequalities. Some of the ISRH team members are involved as core members or collaborators in these initiatives.

A few arm's length government and public sector institutions also have been undertaking sector level reviews to both expose the severity of the problems and develop workable policy solutions. The Office of the Fairness Commissioner (OFC) for example has been conducting a comprehensive review of regulatory bodies and qualification assessment processes for regulated

professions and has raised awareness of the numerous unfair barriers and disparities that internationally trained professional face in entering their field compared to domestic trained professional of similar qualifications. For example, OFC commissioned study found that, compared to domestically trained professionals, internationally trained professionals are three times more likely to be unemployed or employed in an unrelated field. Similarly, in health sector, it took internationally trained health professionally more than twice as long as domestically trained professionals to complete their licensing process. The OFC has put forth workable and urgent policy solutions to regulatory bodies, quality assessment agencies, and to the government for faster and more supportive accreditation process for internationally trained professionals and the elimination of the unnecessary Canadian experience requirement. See OFC's (2010) *Clearing the Path: Recommendations for Action in Ontario's Professional Licensing System*.

At the time of finalizing this report, the Law Commission of Ontario (led by Mohan Sharma) was in the process of conducting province wide consultation on challenges faced by vulnerable, precarious workers. The goal of this consultation process by the Law Commission of Ontario is to protect vulnerable workers by examining policy gaps, enforcement gaps, and policy solutions within existing legislations/policies including: Employment Standards Act, Employment Standards Amendment Act (Temporary Help Agencies; Bill 139), Occupational Health and Safety Act, Workplace Safety and Insurance Act, Labour Relations Act, Pay Equity Act, Human Rights Code. ISRH team members are collaborating with the Law Commission of Ontario (providing evidence from this study and organizing additional focus groups and consultations with vulnerable immigrant and racialized working families) to inform this process. See initial consultation report by the Law Commission of Ontario (2010) titled *Vulnerable Workers and Precarious Work-Consultation Paper*.

Advocacy campaigns and government sanctioned reviews focused exclusively on poverty reduction require some caution and critical re-orientation. Some of the policy solutions from 25 in 5: Network for Poverty Reduction and the Ontario Ministry of Social Services commissioned Social Assistance Review appear promising in mitigating growing poverty in Ontario. The recent shift within both these initiatives to go beyond poverty reduction (previous solutions tended to be limited to injecting money to low-income families) to begin tackling employment and income insecurity/inequalities is a welcome change. The Social Assistance Review has recently been renamed Income Security Review. The 25 in 5:Network for Poverty Reduction campaign currently includes anti-racism and equity recommendations as part of its seven priority areas. These shifts have transpired largely because of the advocacy work by members of Color of Change campaign and other progressive groups.

Broadly, we call on policy makers to take bold proactive solutions to put an end to the following regressive trends:
- Stop the decline in stable, full-time forms of employment
- Stop exploitative practices by employers (wage theft; denying benefits, sick time, holidays; not following safety standards etc)
- Stop direct and systemic racialized discrimination in the labour market (in hiring process and within workplace)
- Stop the jobs-skills mismatch and deprofessionalization experienced by skilled immigrants

Since a growing number of jobs are precarious, Evans and Gibbs (2009) from International Labour Office recommends the following three "safeguarding measures" to protect workers in precarious employment:

- ✓ **Extend Rights:** extend rights guaranteed by employment standards, workers safety and other rights to temporary, contract, self-employed and other precarious workers who currently may not be counted as "employees" and not protected by these fundamental rights
- ✓ **Enforce Rights:** proactively enforce that employers and "labour market intermediaries" (such as temp agencies) do not violate laws and regulations and exploit vulnerable workers
- ✓ **Ensure Right to Recourse:** ensure that workers who do not receive their wages, are not provided with paid holiday or sickness leave, or are refused their legal entitlements to maternity or paternity pay, and those who face discrimination and exploitation should have recourse to a simple, effective and timely way to enforce their rights.

Researchers and advocates from WHO and EMCONET are calling for a new policy dimension called "fair employment" (that builds on ILO's concept of "decent work") and are developing concrete indicators for what constitute "fair employment" including: employment security, fair wage/income, job protection and entitlements that promote long-term economic wellbeing and health (e.g. extended benefits, good retirement programs), employment free of discrimination and exploitation, and employment that allow for democratic participation of workers and promote ongoing skill building and socio-economic enrichment of workers (Benach et al, 2007). See Evans and Gibbs (2009) and Benach et al (2007) for excellent review of promising policy initiatives from different countries to promote "fair employment." Within the Canadian context, policy recommendations put forth by advocates from Color of Change, Workers Action Centre, and Law Commission of Ontario reflect the core principles of "safeguarding measures" for precarious and vulnerable workers and "fair employment."

Building on these progressive efforts, we call on policy makers, business leaders and employers, and decision makers in relevant sectors (health, settlement, community development) to collaborate and consider the following domains of policy solutions to promote socio-economic security and health of racialized working families (agencies and coalitions that have initiated or endorse these policy solutions are noted):

### A. Policy solutions to promote employment security/safety

| Policy solutions | Legislation/Sector | Responsible stakeholders | Solution put forth and/or endorsed by |
|---|---|---|---|
| Expand and enforce ESA to protect all workers (particularly precarious workers), prevent wage theft by employers, and more broadly to stop the increase in temporary, unstable, precarious types of jobs in Ontario. Policy solutions include: (i) make contracting and sub-contracting employers accountable for employment standard violations; (ii) introduce overtime pay after 40 hour/week (similar to six other provinces); (iii) prevent employers from creating excessive overtime; (iv) increase paid vacation from current limit of 2 weeks; (v) | Employment Standards Act; | Ontario Ministry of Labour; | Workers Action Centre; MNLC; MISWAA; Law Commission of Ontario also considering broadening the term "employee" to include all types of workers |

| | | | |
|---|---|---|---|
| extend the monetary limit to monies that can be recovered under ESA violations from $10,000 cap to amounts that is actually reflective of what workers are owed (WAC currently recommends the limit to be increased to $25,000); (vi) increase Employment Standard enforcement officer to inspect and penalize employers who violate employment standards; (vii) make it easier and faster for workers to file employment standard claims | | | |
| Improve regulation of temp agencies to stop these agencies from exploitative practices, wage theft, employment standard violations, and pushing people into unstable employment pathways. | Employment Standards Amendment Act (Temporary Help Agencies; Bill 139), | Ministry of Labour (provincial); HRSDC | Workers Action Centre |
| Enforce effective occupational health and safety protocols (with particular attention that workers who are new to the field or workers with low English language fluency receive necessary safety training and protection). Ensure accessible and timely coverage for workers who have suffered workplace accidents and injuries with attention to overcoming information and linguistic barriers | Occupational health and Safety Act; Workplace Safety and Insurance Act | Ministry of Labour; | Workers Action Centre; ISAC |
| Strengthen the role of unions and collective bargaining systems to protect workers and promote employment security. Accommodate for alternative forms of collective representation including "minority unionism" | Labour Relations Act | Ontario Ministry of Labour | WAC; currently under consideration by Law Commission of Ontario |
| Prevent unfair dismissal for non-unionized workers to address disguised reprisals | ESA | Ontario Ministry of Labour | under consideration by Law Commission of Ontario |
| Expand funding and resources that promote collaboration between employers, unions, and community agencies to create stable employment opportunities/pathways. Policy solutions include (i) more funding for job developers (rather than resume clinics, job search etc); (ii) substantial increase in apprenticeship, professional bridging, on-the-job learning programs in all sectors including in "soft-skill" white collar sectors; (ii) expand accessible programs geared at building strategic skills and employment capacity (within and outside workplace) that can weather economic crisis and recessions; (iii) better training for workers on how to secure more stable forms of employment and take action against employment standard violations | Employment services | Ontario Ministry of Labour; Human Resources and Skill Development Canada (HRSDC); Ontario Ministry of Training and Colleges; | Region of Peel; Color of Change |
| Promote local economic development and creation of stable employment opportunities (not precarious, temp work) in low-income, marginalized communities like the Black Creek area; policy solution to include strategies for overcoming place-based stigmas and barriers to stable employment | Local economic development | Ministry of Labour; City of Toronto | JFAAP; Black Creek West Community Capacity Building initiative |

## B. Policy solutions to overcome systemic discriminations and racialized employment/income inequalities

| Policy solutions | Legislation/Sector | Responsible lead stakeholders | Solution put forth and/or endorsed by |
|---|---|---|---|
| Revive the Employment Equity Act for Ontario and establish an Employment Equity Secretariat to implement a mandatory and comprehensive provincial employment equity in Ontario | Employment Standards Act; Employment Equity Act (Federal) | Ministry of Labour; Ontario Human Rights Commission | Color of Change; also, endorsed by 25 in 5 Network for Poverty Reduction |
| Establish an Equity and Anti-Racism Directorate for ongoing collection, analysis and monitoring of ethno-racial disaggregated data to expose and develop solutions against racialized inequalities in employment, income and health; | All government sector | Collaboration from all levels of government | Color of Change; also, endorsed by 25 in 5 Network for Poverty Reduction |
| Operationalize effective formal complaints process against discrimination/racism in hiring or within workplace | Employment Standards Act; Occupational Health and Safety Act (discrimination as a health and safety risk) | Ontario Human Rights Commission and Attorney General; Office of Fairness Commissioner; | Color of Change; CCPA; JFAAP; MNLC |
| Build capacity of service providers working in employment services and settlement services to work with clients to take action against discrimination/racism in the labour market | | Ministry of Labour; Citizenship and Immigration Canada; Ontario Ministry of Citizenship and Immigration | Color of Change; JFAAP; MNLC |
| Implement anti-racism/anti-oppression training for business leaders and employers (private sector and public sector) | | All sectors | CCPA; Region of Peel |
| Implement anti-racism/anti-oppression training for police to stop racial profiling; Expand programs that enable access to stable, meaningful employment for racialized people (particularly youth) with criminal record. | | Toronto Police Services; Ontario Provincial Police; Ministry of Labour; | JFAAP; Color of Change |
| Ensure accessible, timely and supportive process for reviewing and granting professional licences/accreditation to overcome barriers and employment disparities faced by internationally trained professionals (particularly those from racialized backgrounds) in regulated professions. Remove unnecessary requirements for | Accreditation of international credentials and experience | HRSDC; Respective professional regulatory bodies and the government institution that oversee these | Office of Fairness Commissioner; Region of Peel; Color of Change |

| | | | |
|---|---|---|---|
| Canadian experience as a pre-requisite for getting accreditation; rather, professional bodies should focus efforts on creating opportunities for Canadian experience for skilled immigrants | | regulatory bodies; Qualification Assessment Agencies; | |

## C. Policy solutions to promote long-term income/economic security

| Policy solutions | Legislation/Sector | Responsible stakeholders | Solution put forth and/or endorsed by |
|---|---|---|---|
| Introduce "living wage" policy that reflect minimum wage regulation and wage rates that account for inflation and enables working families to live a life of dignity | Employment Standards Act; | Ontario Ministry of Labour | CCPA; MISWAA; Workers Action Centre; Color of Change; City of New Westminister first to adopt living wage policy in Canada |
| Introduce progressive tax credits and working income supplement to promote income security of low-income wage earners | | Government of Canada; | MISWAA; ISAC |
| Reform Employment Insurance program to meet needs of the growing precariously employed people including reducing eligibility requirements, extending benefits period, improved access to Second Career grant | Employment Insurance Act | HRSDC | Workers Action Centre; MISWAA; ISAC; CCPA |
| Reform social assistance system including increasing amounts for Ontario Works and Ontario Disability Support Program while removing barriers, "asset striping" mechanisms, and income penalties that undermine income security and access to stable employment pathways for low-income families. | | Ontario Ministry of Community Services and Social Welfare; Ministry of Labour; HRSDC; | WAC; 25 in 5; ISAC; currently under consideration by Law Commission of Ontario |
| Reform government led and employer supported retirement programs to ensure long-term income security; extend retirement schemes to precarious workers | | Ontario Ministry of Community Services and Social Welfare; Ministry of Labour; HRSDC; | ISAC; CCPA |
| Reform Resettlement Assistance Program (RAP) for sponsored refugees to accommodate for acute difficulties that refugees face in finding stable employment. Solutions including extending RAP support to more than 1 year, increasing amount of support, and eliminating the requirement for government sponsored refugees to repay transportation costs back to the government | Immigration and Refugee Protection Act | Citizenship and Immigration Canada | Canadian Council for Refugees; OCASI |

## D. Policy solutions to promote health, social inclusion and social wellbeing

| Policy solutions | Legislation/Sector | Responsible stakeholders | Solution put forth and/or endorsed by |
|---|---|---|---|
| Provide essential extended health insurance coverage (prescription drugs, dental care, eye care, physiotherapy, chiropractor, massage therapy) for precariously employed families who are not covered by employer funded extended health insurance program | | Ontario Ministry of Labour; Ontario Ministry of Health and Long-term Care | 25 in 5; MISWAA |
| Provide accessible and affordable childcare/daycare programs | | Government of Canada; | MISWAA; ISAC |
| Expand affordable housing through investing more in public housing, increasing housing subsidy, enforcing rent caps, and progressive housing tax credits to offset economic burden from housing costs | | HRSDC | Workers Action Centre; MISWAA; ISAC |
| Increase transportation subsidies and tax credits to make public transportation more affordable | | | |
| Expand English/French language training programs (ESL/FSL and LINC) as well as increase funding for professional interpretation services to overcome linguistic barriers | Immigration and Refugee Protection Act; | CIC; Ontario Ministry of Citizenship and Immigration; | OCASI; Access Alliance |
| Integrate health/mental health services within employment and settlement services to proactively address health/mental health concerns caused by employment/income insecurity | | Ontario Ministry of Health and Long-term Care; Ontario Ministry of Labour | |

Importantly, we urgently call for more effective enforcement of the Federal Employment Equity Act and the re-introduction of Employment Equity Act in Ontario (and other provinces) as a fundamental step to overcoming the growing economic and health disparities in Canada. The work of the Royal Commission on Equality in Employment in 1984 led by Justice Rosalee Abella highlighted the need to move away from "case-by-case" approach to dealing with discrimination and helped to usher in the employment equity legislation at the federal level (and at least for a time being at the provincial level in Ontario) (Cornish, 2010). The recommendations from this Commission carry more relevance today in light of the evidence of growing inequalities and discrimination in the labour market. To quote Justice Abella:

> *Systemic discrimination requires systemic remedies. Rather than approaching discrimination from the perspective of the single perpetrator and the single victim, the systemic approach acknowledges that by and large the systems and practices we customarily and often unwittingly adopt may have an unjustifiably negative effect on certain groups in society. The effect of the system on the individual or group, rather than altitudinal sources, governs whether or not the remedy is justified.*

> *Equality in employment means that no one is denied opportunities for reasons that have nothing to do with inherent ability. It means equal access free from arbitrary obstructions..*

Closing the gap in economic and health disparities faced by racialized groups also requires closing the gap in terms of research evidence on racialized disparities in Canada. In terms of future

research directions, results from this qualitative study point to the urgent need for systematic large-scale provincial and national level studies on employment, income and health inequalities faced by racialized groups. In order to effectively understand the systemic causes and impacts of racialized inequalities in Canada, research needs to be grounded on "critical race theory/praxis" (see Thomas et al, 2011 for call for fourth generation of disparities research by US researchers) social determinants of health, and health equity. The following are some of the areas for further inquiry that this study has generated preliminary insights for:

- ✓ Gendered barriers and discrimination in the labour market faced by racialized women and gendered responses to achieving employment and income security
- ✓ Impact on household gender relations from employment and income insecurity
- ✓ Impact of not having accessible/affordable childcare on employment status and employment pathways
- ✓ Everyday level family strategies for achieving employment, income and health security
- ✓ Health impacts (physical, mental, and overall health) of discrimination, employment and income security faced by racialized groups
- ✓ Impact on family health from employment and income insecurity
- ✓ Impact on community health from employment and income insecurity
- ✓ Intergenerational impacts of employment and income insecurity
- ✓ Impact on children's health and education from employment and income insecurity
- ✓ Transnational impacts of employment and income insecurity
- ✓ Role of volunteer work in promoting employment and income security
- ✓ Role of temp agencies and precarious employment pathways
- ✓ Role of informal sector employment in meeting household income security
- ✓ Impact of place-based discrimination and stigma on employment pathways
- ✓ Impact of racial profiling on employment pathways
- ✓ Impact of discrimination and racism on employment pathways and health
- ✓ Perceptions and responses to discrimination and racism experienced in the labour market
- ✓ Cost to the healthcare system due to health impacts caused by growing employment and income insecurity
- ✓ Cost to Canadian economy due to growing employment and income insecurity and the deprofessionalization of skilled immigrants
- ✓ Impact on service providers and service delivery models due to growing employment and income insecurity
- ✓ Promising and proven models of services that promote long-term employment/income security and health
- ✓ Promising and proven policy solutions in promoting long-term employment/income security and health
- ✓ Promising and proven policy solutions in overcoming systemic discrimination

As noted in the introduction, the third phase of the research by ISRH team (to be completed by the end of 2011) involves conducting in-depth family level interviews (2 rounds of interviews with 2 adult members of the family) with 12 precariously employed racialized residents from Black Creek area. The goal of this study is to better understand the everyday level family strategies that precariously employed people use to achieve employment and income security and the everyday level family level impacts from precarious employment. At the same time, Access Alliance is conducting a study on gendered labour market barriers faced by racialized newcomer women (to be completed by 2012).

During one of the project's photovoice sessions in 2008, a young racialized photo-researcher asked ISRH researchers whether it was worth it for racialized youth like him to study hard if racialized people are going to end up unemployed or precariously employed and poor in spite of having strong educational qualifications. This youth was reacting to the presentation by one of the ISRH researchers on data about growing racialization of poverty in Canada. In reality, he was not asking a question but making a profound statement that underscores the severity of systemic implications of racialized inequalities. The answer to this youth has to be a definitive "Yes, it is worth it"; but to give this response unequivocally, bold policy solutions are urgently required to overcome racialized economic and health disparities. We ask each policy maker to reflect on whether they can answer "Yes, it is worth it" to this youth; and if so what bold and progressive policy solutions they are willing to implement to make it worth it for racialized youth like him to study hard so he/she can achieve employment/income security and health and live a life free of discrimination.

In the photovoice sessions, several youth participants preferred to digitally superimpose their own images or images of other racialized youth onto different settings in their community. Closer analysis of youth narratives reveals that this was an attempt of racialized youth to assert their presence within dominant landscapes. The following photo titled "I am here" by Anthony is an example of this:



Collage by: Anthony
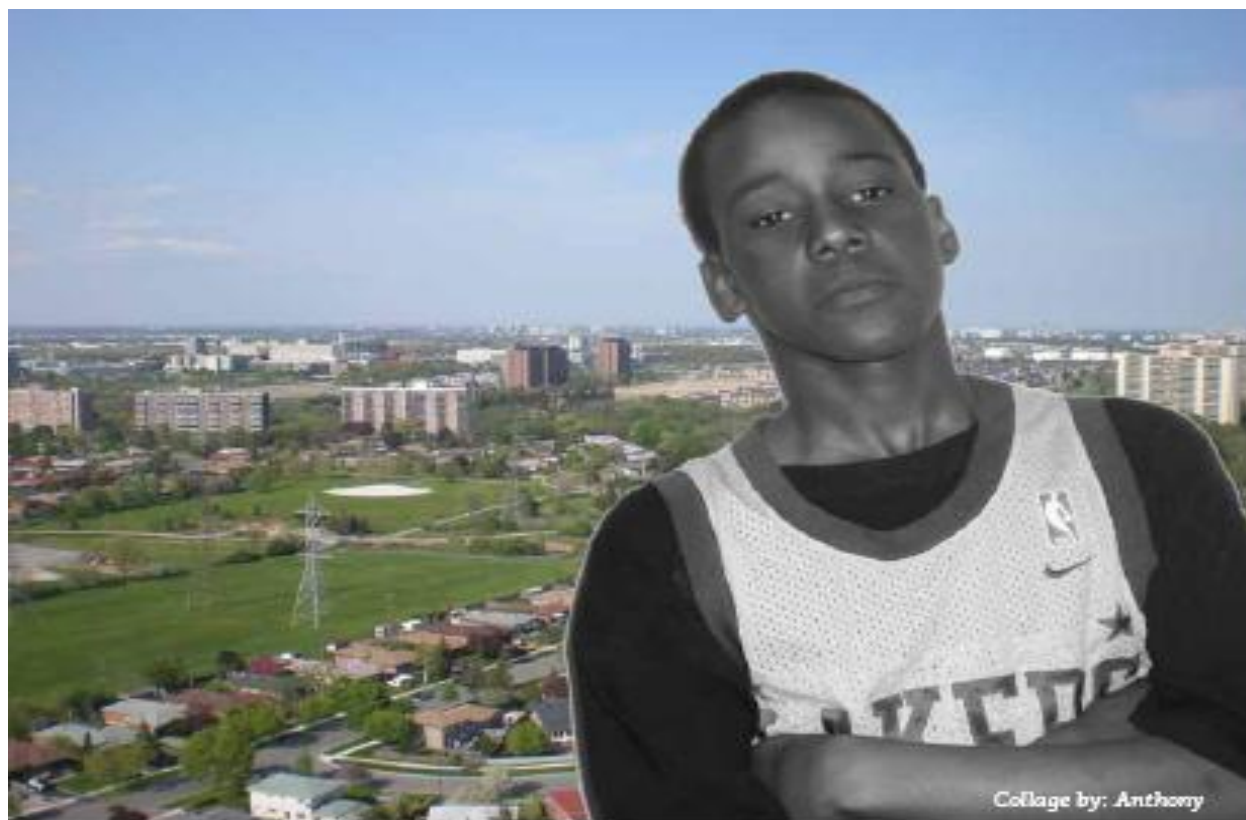
I Am Here

To build on Anthony, "racialized people are here" and cannot be ignored and excluded.

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