
Over the past three decades the labour market outcomes of immigrants to Canada have declined. Many recent arrivals have had difficulty finding employment, and earnings have gone down, particularly among men. Research has shown that there is no single explanation for this decline, pointing instead to a number of factors such as a shift in source countries, weak language skills, low economic recognition of foreign work experience and the high-tech bust of the early 2000s.

- Most economic class immigrants have entered through the Federal Skilled Worker Program (FSWP) and its Quebec counterpart; they have been selected under a points system
- Family class is the second category, including spouses or partners, children, parents and grandparents
- A smaller share of immigrants enter as refugees which is the third main group increasing scope of the Provincial Nominee Program (PNP) and its growing share of new immigrants have made the system more complex and the selection criteria less easily understood.

Link to the report:

http://www.irpp.org/pubs/IRPPstudy/IRPP_Study_no29.pdf

Colour Coded Health Care: The Impact of Race and Racism on Canadians’ Health by Sheryl Nestel PhD, Wellesley Institute, January 2012.

Canada is home to a much-admired system of universal health care, understood as a central pillar of this nation’s overall commitment to principles of social equity and social justice. This report offers a survey of relevant academic and community-based research on racial disparities in the health of Canadians appearing between 1999 -2010. In addition to surveying the research on mortality and morbidity by radicalized groups in Canada, it surveys the evidence of bias, discrimination and stereotyping in health care delivery.

- Study has confirmed earlier research demonstrating that immigrant health begins to decline soon after immigration to Canada
- Data show that even after controlling for experiences of discrimination and for socio-economic status, “visible minority” status was a statistically significant factor in the decline of immigrant health
- Non-European immigrants are more likely than Canadian born individuals to become physically inactive over time and more likely to increase their body mass index, which might explain the deterioration of their health over time
Native-born Canadians were much less likely to report a decline in health over time than were immigrants.

Black immigrants were found to be 76% more likely to assess themselves as “unhealthy” than were other radicalized groups.

For link to the report:


Dementia A Public Health Priority, World Health Organization (WHO), April 2012.

The world’s population is ageing. Improvements in health care in the past century have contributed to people living longer and healthier lives. However, this has also resulted in an increase in the number of people with non-communicable diseases, including dementia. Current estimates indicate 35.6 million people worldwide are living with dementia. This number will double by 2030 and more than triple by 2050.

- Dementia is overwhelming not only for the people who have it, but also for their caregivers and families
- It is one of the major causes of disability and dependency among older people worldwide
- There is lack of awareness and understanding of dementia, resulting in stigmatization, barriers to diagnosis and care, and impacting caregivers, families and societies physically, psychologically and economically
- The huge cost of the disease will challenge health systems to deal with the predicted future increase of prevalence
- Sustained action and coordination is required across multiple levels and with all stakeholders – at international, national, regional and local levels.

For link to the report:


The connections between low income, social inequality and exclusion, and poor health are well established. These systemic disadvantages are realities for people on social assistance. Relying on social assistance means having low income, limited opportunities, and poorer health.

- Health for clients should be adequate so that people on social assistance can maintain a healthy standard of living
- It should be flexible with a range of responsive supports to help people out of poverty — recognizing that there are very different pathways into and out of poverty
Person-centred so services and requirements are responsive to individual and family needs and situations, are delivered in a respectful manner that does not undermine dignity, and are empowering to support people in achieving more control over their lives.

It should be health-enabling so that people's opportunities for better health are enhanced, not eroded.

For link to the paper:


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This study investigates job-related training of Canadian employees age 55 to 64. Using the Access and Support to Education and Training Survey (ASETS) and several cycles of the Adult Education and Training Survey (AETS), it compares the training of older and core-age workers and tracks changes in the incidence and correlates of training over time.

Some of the highlights:

- Older workers were significantly less likely to take job-related training than their core-age counterparts. Between July 2007 and June 2008, 32% of workers age 55 to 64 took some training compared to 45% of those ages 25 to 54.
- Older workers with lower personal income, less than postsecondary education, temporary employment, and sales or service jobs, along with those working in the private sector and goods-producing industries were significantly less likely to participate in training than others the same age.
- The training gap between older and younger workers has narrowed over time as the training rate for older workers more than doubled from 1991 to 2008.
- About 61% of the increase in the training participation rate of older workers was attributed to increases in educational attainment and changes in the types of jobs held by more recent cohorts.

For link to the article:


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**Canada Speaks 2012: Mental Health, Addictions and the Roots of Poverty** by The Salvation Army, May 01, 2012.

This report reveals perceptions and attitudes among the Canadian public about individuals dealing with addiction or suffering from mental illness. The survey of more than 1,000 Canadians, conducted in February by Angus Reid Public Opinion, revealed that many Canadians have been personally touched by the issue, with 80 percent reporting that they have either a friend or family member who has experienced mental illness and/or addiction.
Some of the key findings:

- Most Canadians recognize the linkage between mental health and addiction with 71 percent agreeing that “a lot of people with addictions have mental health problems”
- Eighty (80) percent of survey respondents reported their belief that mental illness causes many Canadians to experience poverty
- Eighty seven (87) percent of respondents believe that mental illness should be a higher priority for the government
- Eighty four (84) percent of those surveyed think that there should be more services to help people with addictions.

For link to the report:


Final Report - Toronto Aboriginal Research Project (TARP) by Don McCaskill Kevin FitzMaurice Jaime Cidro Commissioned by Toronto Aboriginal Support Services Council (TASSC), 2011.

Recently as part of the larger national trend in Aboriginal urbanization, Aboriginal people have been moving to Toronto since the early 1950s. According to the 2006 Census, the Greater Toronto Area has the largest (31,910) Aboriginal population of any city in Ontario, comprising 13% of all Aboriginal people in Ontario.

Some of the recommendations:

- That the City of Toronto give priority for Aboriginal Families in the subsidy system to allow for access to culturally specific Aboriginal childcare spaces
- That the City of Toronto builds the cost of transportation supports into the development of programs related to Aboriginal children and families, such as Little Voices Child and Family Centres and Childcares
- That the City of Toronto enter into discussions with the Province of Ontario and the Federal Government (Health Canada) to look at building a demonstration site where relationships can be nurtured to include ‘successful practices’ in sharing the resources, relationships between Aboriginal Head Start, Pathways, Provincial Children and Youth Services and the City of Toronto’s Children Services
- That Aboriginal and non-Aboriginal agencies providing children and youth programs and activities get together to better coordinate their services including creating a body of agency staff working in youth programs to coordinate and establish a central facility that can act as a ‘hub’ where children and youth can go to access services
- That a number of youth-Elders programs be established to bring these two groups together for traditional cultural and language teaching, including learning to be helpers and assuming appropriate attitudes and behaviours, thus providing youth with a sense of Aboriginal identity and training a new generation to take their place in the Aboriginal community in a positive way.

While employment continued to rise, today's employment report suggests that the pace of job growth slowed. Employer payrolls increased only by 115,000 jobs, following a gain of 154,000 last month and average increases of 252,000 per month in the three prior months. U.S. immigration policy continues to be a key issue of debate among federal and state policymakers alike.

- Because of the weak labour market immigration flows have changed dramatically since the start of the Great Recession—the undocumented population has declined
- Although many are concerned that immigrants compete against Americans for jobs, the most recent economic evidence suggests that, on average, immigrant workers increase the opportunities and incomes of Americans
- Economists do not tend to find that immigrants cause any sizeable decrease in wages and employment of U.S.-born citizens
- Immigrants and U.S.-born workers generally do not compete for the same jobs; instead, many immigrants complement the work of U.S. employees and increase their productivity.

For link to the study:

http://www.brookings.edu/opinions/2012/0504_jobs_greenstone_looney.aspx