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CANADA 2017

SERVING CANADA'S MULTICULTURAL
POPULATION FOR THE FUTURE

POLICY FORUM

MARCH 22-23, 2005

DISCUSSION PAPERS

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“The views expressed in the discussion papers are those of the authors and do not necessarily reflect those of the Department of Canadian Heritage or the Government of Canada”.

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CANADA 2017—SERVING CANADA'S MULTICULTURAL POPULATION FOR THE FUTURE—POLICY FORUM

WELCOME AND ACKNOWLEDGEMENT

The Multiculturalism Program welcomes you to the Canada 2017 Policy Forum. The year 2017 marks the 150th anniversary of Confederation in Canada, and serves as an appropriate date to look into the future and proactively begin preparing for it.

The Multiculturalism Program has organized this forum to assess and analyze the future demographic landscape of the country and generate discussion across government departments on how we can better prepare ourselves for the Canada of tomorrow. In support of this conference, Statistics Canada has provided a report entitled Population Projections of Visible Minority Groups, Canada, Provinces and Regions, 2001-2017.

The task of organizing the Canada 2017 Policy Forum fell to the members of the Policy and Research Directorate, Multiculturalism and Human Rights Branch, at the Department of Canadian Heritage. The success of this forum is the product of their efforts, diligence and hard work.

The Canada 2017 Policy Forum is comprised of five thematic panels which explore diversity issues and relevant policy options: Cities, Labour Markets, Generational Challenges and Opportunities, Health and Social Services, and Public Institutions. The panels were developed with the assistance of an inter-departmental advisory committee, and we wish to express our appreciation to the committee members for their guidance.

The Multiculturalism Program has commissioned five forward-looking think pieces to address the challenges that Canada will face in the next 15 to 20 years: Daniel Heibert analyses the changing social geography of Toronto Vancouver and Montréal and its impact on ethno-cultural integration; Krishna Pendakur provides projections of future visible minority labour market and workplace inequality; Barbara Mitchell addresses the generational problems that diverse families will face over time and under changing circumstances; Jacqueline Oxman-Martinez and Jill Hanley cite the need for greater multicultural access to health and social services; and Andrew Cardozo examines the representation and participation of visible minority Canadians in public institutions.

We have invited a broad range of representatives from civil society and government to participate in the panels and to enrich our policy debates. We are grateful to the think-piece authors and the panel participants for their invaluable contribution.

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CANADA'S ETHNO-CULTURAL COMPOSITION IN 2017: EXPLORING THE EMERGING CHALLENGES FACING CANADA WITH RESPECT TO ITS VISIBLE MINORITY POPULATION IN SELECTED POLICY AREAS

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INTRODUCTION

The demographic face of Canada has been transformed through successive waves of immigration. One of the most important trends since the 1980s has been the level of visible minority immigration¹. Of course the members of visible minority groups may have originated from many countries and the term visible minority, although contentious, is used to refer to newcomers and Canadian-born individuals alike who may be identified according to these groups. Therefore, where the 2001 Census reports that there are almost 4 million visible minorities living in Canada, or 13.4% of the population, this figure refers to immigrants and Canadian-born visible minorities cumulatively. And this is important because any consideration of the emerging challenges that Canada faces with respect to its visible minority population must not be formed as a matter of immigration exclusively.

Canada faces a number of challenges with respect to its evolving ethno-cultural composition. Some of these include reducing labour market and workplace inequities, responding to the need for multicultural access to health and social services, balancing the social geography of cities, ensuring the representation and participation of all Canadians in public institutions, and addressing the generational problems that diverse families face over time and under changing circumstances. Statistics Canada's demographic projections, which have been in circulation for some time, tell us that visible minorities will make up approximately 20% of the population by 2016. 2017 marks the 150th anniversary of Confederation in Canada and serves as an appropriate date for anticipating future circumstances in light of the social, economic and political barriers that groups and individuals are working to overcome today. The Multiculturalism Program in partnership with Statistics Canada has organized the *Canada 2017 Forum* to assess and analyze the future demographic landscape of the country and generate discussion across government departments on how we can better prepare ourselves for the Canada of tomorrow. In support of this conference, Statistics Canada has provided a report entitled *Population Projections of Visible Minority Groups, Canada, Provinces and Regions, 2001-2017*.

In addition to the data projections produced by Statistics Canada, the Multiculturalism Program commissioned five forward-looking and thought-provoking think pieces, which address some of the unique challenges (and opportunities) that Canada will be faced with in the coming 10 to 15 years. In part, the purpose of the think pieces is to stimulate discussion on a government-wide framework for diversity-related policies that respond to Canada's future demographic landscape.

In this paper I will summarize some of the key observations and policy recommendations that our 2017 authors provide, respectively, in their papers on (1) labour market barriers, (2) access to health and social services, (3) the social geography of cities, (4) the representation of visible minorities in public institutions and (5) the generational challenges of diverse families. I will also highlight themes that the authors share and from those commonalities attempt to draw some tentative conclusions regarding the challenges of integration. One overarching idea in this context will be the need to make sense of visible minority issues in terms of our collective citizenship responsibilities. In other words, our federal, provincial,

¹ The term visible minority is defined in the *Employment Equity Act* as referring to "persons, other than Aboriginal peoples who are non-Caucasian in race or non-white in colour". This category includes the following groups: Blacks, South Asians, Chinese, Koreans, Japanese, Southeast Asians, Filipinos, Arabs and West Asians, Latin Americans, and Pacific Islanders.

and municipal governments will increasingly, in the years to come, be called upon to explain to Canadians what kind of society we are hoping to achieve with respect to our interconnected policies of immigration, multiculturalism, and shared citizenship.

KEY OBSERVATIONS

Labour Markets

In his paper *Visible Minorities in Canada's Workplaces: A Perspective on the 2017 Projection*, Krishna Pendakur reminds us of the overall trend concerning visible minorities in the Canadian labour market. Although patterns of visible minority and white earnings were converging between 1970 and 1985, diverging between 1985 and 1995, and static between 1995 and 2000, the consistent story is that visible minorities fare worse in Canada's labour markets than their similarly aged and educated white counterparts, meaning that the differential in earnings has not dissipated over time. Pendakur then asks us to consider this pattern of labour market inequity in the context of visible minority residential concentration in Canada's major cities, citing examples like the suburb of Richmond in Vancouver where visible minorities are hardly the minority any longer, at approximately 60% of the population. In the context of future demographic projections he asks specifically whether we have any reason to believe that the growth of visible minority populations in Canadian cities will lead to better outcomes for them, at least in those particular urban markets. Here the author provides some cautious optimism, citing a weak but positive correlation between the numbers of visible minority residents in a city and the relative earnings of that population. In other words the earnings gap between visible minorities and whites may be narrowing in those cities where visible minority populations are growing. But Pendakur suggests that much more research is needed, studying the labour market outcomes of visible minority populations in cities over time, if we are to test the correlation accurately.

Perhaps the most compelling observation that the author provides relates to the labour market performance of so-called multiple-origin visible minorities. The term multiple-origin refers to visible minority individuals who are partly European (read: white). Research shows that multiple-origin visible minorities' earnings differentials compared to whites are smaller than those of single-origin visible minorities. Since visible minority immigrants to Canada tend to be single-origin, Pendakur outlines a tentative claim that certain aspects of integration, specifically exogamous unions between European/ non-visible minority and visible minority Canadians, might be considered a positive future trend contributing to the convergence of earnings differentials between visible minorities and whites down the road. In forming this projection Pendakur cites research into mixed unions that shows that the vast majority of such unions are between a member of a visible minority and a non-visible minority. Since it is believed that a significant proportion of the anticipated visible minority population growth between now and 2017 will include Canadian-born individuals it is likely that a significant number of these people will be the children of exogamous unions, and therefore multiple-origin visible minorities. According to Pendakur, if earnings trends remain stable, these mixed children should expect to have relatively good labour market outcomes.

And this raises a further point regarding ethnic identity. The increasing existence of multiple-origin children combined with a projected majority status for visible minorities in major cities and key suburbs will likely lead to a situation in which identifying as a minority becomes more and more contested. As the interpretation of ethnic identity opens up, in this context, it is likely that a broadening of job choices and aspirations within the labour market will follow for visible minorities. But as Pendakur reminds us, against the backdrop of historic discrimination in the labour market, ethnic identity can affect both the preferences and the constraints people face. In terms of ethnic identity and labour market choices, therefore, the author suggests that our ability to improve labour market outcomes for visible minority Canadians in the years to come will depend, at least in part, on our ability to create a society in which differences in labour market preferences and aspirations are tolerated but differences in treatment are not.

Health and Social Services

Authors Jacqueline Oxman-Martinez and Jill Hanley have written a paper entitled *Health and Social Services for Canada's Multicultural Population: Challenges for Equity*. The authors present their observations in several parts, focusing on specific dimensions of inequality including factors of gender, income, education, employment, and social support networks. The

premise of this approach is that most determinants of health have a social rather than bio-medical origin and that problems emerging from the implementation of the traditional bio-medical health model raise the need for action if our goal is equity in health for Canadians of increasingly diverse ethnic backgrounds.

The most significant social factor that intersects negatively with nearly all health determinants is poverty. Thus, the authors point out that ethno-racial minorities, whether Canadian or foreign born, face greater economic difficulties, working longer hours in lower paying jobs and often under conditions that have a negative impact on health either due to stress or other environmental influences. These problems are made worse for some newcomers who are unable to access government income security programs. And many non-European immigrants of working age and higher post-secondary education often find it difficult to enter the Canadian labour market in positions commensurate with their skills and experience.

Because cultural beliefs and practices frame our understanding of illness and our response to health concerns there is a potential gap between the kinds of services offered and those needed under circumstances in which culturally diverse communities face what might be described as the culturally monolithic approach used by most helping professionals in North America. Because gender roles are heavily influenced by culture it is often the case that women especially follow more traditional health care methods when possible. With this in mind Oxman-Martinez and Hanley suggest that when practices are adaptable with respect to alternative cultural approaches to health care a more complementary system is developed. On the other hand if approaches clash then beneficial effects can be cancelled out, conflict can arise between service-providers and individuals/families, and real harm can be done.

With nearly 20 percent of Canadians born elsewhere the process of migration has come to be seen as an important influence on health as well. Factors of fatigue, stress, and depression can impact upon health and for many refugees pre-migratory circumstances can result in serious physical and psychological trauma. For those migrants with latent health problems the migration path can sometimes trigger illness. Post-migration factors such as settlement resources, social networks, levels of acculturation and language ability can be an influence on health as well.

In terms of social services a number of barriers remain for Canada's ethno-cultural minorities. Due to cultural attitudes and a lack of familiarity with the Canadian health system immigrants suffering from mental and emotional health problems tend to under-use available services. Also, for immigrants, lack of proficiency in English or French can be a barrier to accessing health services. The impact of language discordance between patient and service provider has been well documented. In other cases financial barriers remain due to a lack of insured services in the areas of dental care, eyeglasses, prescription drugs, etc. Studies also show that few immigrants apply for private health insurance while they wait for public health insurance coverage to begin.

Looking ahead to 2017, Oxman-Martinez and Hanley suggest that overall there will simply be a greater number of people using the health care system without necessarily sharing all the dominant cultural reference points. The authors make special note of the growing need for cultural competence, gender sensitivity and anti-racism within the public system. Care for visible minority seniors will also be an increasing concern in the years to come despite the youthful profile projected for visible minority and immigrant communities in 2017.

Cities

Daniel Hiebert outlines several key trends with respect to visible minority populations in Montreal, Toronto, and Vancouver in his paper *Migration and the demographic transformation of Canadian cities: The social geography of Canada's major metropolitan centres in 2017*. Hiebert describes a major shift in settlement patterns for immigrants to Canada, contrasting the situation of half a century ago, where European immigrants took up largely blue-collar jobs and established homes in inner city immigrant districts, with the more recent pattern of visible minority settlement in suburban centres, often on the periphery of metropolitan regions, especially in Vancouver as is the case with a number of Punjabi-speaking immigrants and in the Toronto region with respect to a cohort of new Chinese Canadians.

In reference to the most recent demographic and socio-economic developments in Montreal, Toronto and Vancouver, Hiebert wonders whether we would characterize this process as a matter of cultural mixing between host and newcomer (European and visible minority) groups or whether this pattern is better described as a new form of enclave formation. If minority groups are forming enclaves then the extent to which they are economically marginalized becomes a potential problem where residential concentration and marginalization can lead to ghettoization. Therefore Hiebert asks whether the emerging patterns of social geography in Canada's major cities are problematic. And he implicates in this question the recent adoption of regionalization policy, which seeks to redistribute immigrants to centres outside Montreal, Toronto, and Vancouver.

In forming an answer the author cites the same earnings differential research on Canadian-born visible minorities that Pendakur refers to in his paper on labour markets. But Hiebert also mentions figures for visible minority immigrants and in citing the 2003 Canadian Council on Social Development study, *Poverty by Postal Code*, he reports a drastic increase in poverty between 1981 and 2001 for areas settled by immigrants and visible minorities in the Greater Toronto Area. This leads him to project that if the year 2017 brings about the simple extension of the 1981-2001 pattern of increasing poverty among newcomers and members of visible minorities, then Canada's metropolitan centres will be places of ever increasing vulnerability and polarization. Yet at the same time the author claims that there is no clear causal link between concentrated forms of settlement and socio-economic marginalization. Hiebert's main observation, therefore, is that socio-economic marginalization is due to barriers in the labour market, in language acquisition, in housing, and in the establishment of more expansive social networks, not in enclave formation per se.

Establishing this overall position leads Hiebert to observe further, and with a great deal of conviction, that a geographical solution, namely redistributing immigrants to centres outside the three major cities, is not appropriate for tackling the problem of marginalization. Hiebert states that the overall map of visible minorities in 2017 will represent something never seen before in Canadian cities, as approximately half of the metropolitan population and well over 80 percent of certain suburban areas will be made up of non-European people. But ensuring that we are able to provide a much brighter future for visible minorities will depend on policies and initiatives that make a positive difference within the communities, whether urban or suburban, that people naturally choose to settle in.

Public Institutions

In his paper *Public Institutions and Institutional Change: Diversifying the Government of Canada* Andrew Cardozo focuses on the representation of visible minorities in the federal public service offering related observations concerning strategies for implementing diversity policies across government departments, programs and agencies. Cardozo's main observation is that, although Canada's big cities are changing dramatically in terms of diversity, the face of the federal public service remains overwhelmingly white, especially at the senior levels of government. Thus Cardozo makes note of the fact that visible minority representation in private sector areas such as banking and communications is much higher at 18.4% and 11.6% respectively than it is in the public service where the number was as low as 7.8% in 2003-04. Furthermore, the rate of external recruitment appears, at last count, to be 1 in 10 for visible minorities, among new entrants to the public service, where a special report in 2000 entitled *Embracing Change in the Public Service* recommended a recruitment rate of 1 in 5. However, Cardozo places this slow process in historical context, suggesting that it takes time to reach appropriate levels and he reminds us of the process from the late 1960s onward which saw the gradual inclusion of women and Francophones in the federal public service.

Beyond statistics, the author offers a qualitative argument with respect to encouraging employment equity in the public service. He suggests that hiring according to the merit principle can be problematic where that principle is interpreted narrowly in terms of personal suitability. In this way the author suggests that merit is often used as a way of hiring according to capacities that represent the dominant race, ethnicity, and class. This position seems reasonable in principle, but Cardozo's argument falters where he redefines merit as the ability to understand the citizenry and in relating this ability to social and cultural tastes. In other words it is one thing to insist that the public service reflect the demographic profile of the country but another altogether to suggest that cultural and social preferences determine one's ability to understand the views of the

citizenry, let alone that scrutinizing those preferences should be included in the process to improve employment equity outcomes. Obviously for certain job descriptions understanding the views of the public, in terms of specific groups of citizens, would be a prerequisite but generalizing this requirement for all public servants is both unreasonable and incoherent as a hiring condition.

Nevertheless, Cardozo does offer some food for thought and goes on to observe that in the Aboriginal and official languages field many gains have been made by various federal departments. The author also compares the way in which official languages policy is implemented with the applicability of the multiculturalism policy across government. Although both policies apply to all federal departments, the official languages policy requires uniform implementation with respect to increasing the number of people working in both official languages whereas multiculturalism legislation directs each federal institution to implement multiculturalism in a different way, as it applies to their own mandate.

What is noteworthy about the implementation of multiculturalism is that the Multiculturalism Program's annual report, tabled in the House of Commons, lists the accomplishments of a number of departments and agencies but includes no targets, timetables, or measurements for institutions in the area of multiculturalism. Here Cardozo characterizes the annual report as valuable and he even describes it as "one of the best kept secrets in Ottawa" but he also suggests to some extent that the weakness of the report, in terms of its lack of influence on federal institutions, is a concern. And here it seems reasonable for us to take this concern even further and suggest that, given the idea that the report is still a secret, the larger relevance of multiculturalism as a prevailing ideology across government is put into question. This might mean that the Government's approach to multiculturalism should be rethought and that what multiculturalism means in terms of specific areas of policy influence be reorganized to put visible minority issues front and centre on the national agenda heading towards 2017.

Generational Challenges

The central theme of Barbara Mitchell's paper *Canada's Growing Visible Minority Population: Generational Challenges, Opportunities and Federal Policy Considerations* is that examination of visible minority generational issues should adopt a life course lens. This provides the opportunity to look at issues within the context of family transitions, trajectories, and changes in resource availability over time. Although a life course framework may draw on a wide range of perspectives, Mitchell highlights an emphasis on diversity in access to resources (e.g. economic and social) during transitional periods and the effect of these changes on other family members, especially from an intergenerational viewpoint.

With respect to generational relations at the family level Mitchell observes that foreign-born families may be susceptible to higher levels of generational conflict when traditional norms and values clash with the influence of Canadian culture on the younger generation. Such clashes can impact upon filial obligation, family roles, and respect for the elderly. Poverty can affect intergenerational transfers of capital and this is evident in the high rate of child poverty (49%) amongst recent immigrants; especially vulnerable are children whose ethnic origins are Arabic, Black/Caribbean, Latin/Central/South American, Spanish (born in the Americas), Vietnamese and West Asian. Women and the elderly can be vulnerable due to family roles and ineligibility for pensions respectively.

Instrumental and affective exchanges of support are more intensive when family members share a residence, and in the case of visible minority families this can sometimes lead to crowding and unhealthy housing conditions within three-generational households. The poor health of older family members can create dependence on younger family members for caregiving and this strain can sometimes lead to elder abuse. In terms of well-being, immigrant youth are twice as likely to suffer from depression and this may be linked to discrimination within society and abuse within the home.

In terms of larger, environmental barriers Mitchell mentions the issue of economic integration, including the well-known problem of credentials recognition, discrimination in the workplace, lack of Canadian work experience, a deficit of language skills, and the absence of a social network that can facilitate finding work. Other environmental factors include the challenge of accessing affordable daycare and the challenge for children and youth of integrating into the school system. Family

and friendship networks can provide visible minority families with a number of resources (e.g. cultural, information and support) but they can also lead to gang and drug violence among youth. Ethnic neighbourhoods help maintain the retention of ethnic identity but can sometimes impede the development of much needed language skills and educational and work experience. Finally, visible minority families are often unaware of available services or they are reluctant to use them due to different norms of family privacy or language barriers. Given all these factors affecting the life course of families Mitchell perceives a considerable challenge ahead for all of us if we are to improve conditions and outcomes for visible minorities by 2017.

POLICY RECOMMENDATIONS

Barbara Mitchell makes a number of excellent policy recommendations with respect to the emerging generational challenges facing Canada's visible minority population. In terms of immigration policy she suggests that the processing time of immigration applications be reduced to eliminate the potential negative consequences for family unification and development and she recommends a greater investment by the Government in policies that promote adjustment, adaptation and integration into Canadian society. In the area of child care and education she signals the need for targeted and culturally relevant pre-school and daycare programs and calls for an expansion of curriculum training modules for teachers to support understanding of ethnocultural relations.

With respect to income and employment concerns Mitchell echoes the need to push forward quickly on the credentials recognition front and emphasizes the need for public education policies that focus on the problem of ethnocultural discrimination in employer/worker relations. Mitchell offers other recommendations concerning policies that deal with access to social services, but her final recommendation is probably the most important with respect to the role of the federal government. Here Mitchell reminds us that a major limitation to effective and efficient policy is the absence of integration across ministries and portfolios. She states that greater intersectional collaboration would reduce unanticipated negative consequences of policies on visible minority families. Also, increased cooperation and collaboration across ministries, including support for research into visible minority issues, would help streamline policies and make them more effective.

Andrew Cardozo elaborates several points concerning human resource issues, the use of visible minority skills and experience, and the significance of ethnocultural diversity to the Government's emerging Cities agenda. With respect to human resources, the author reminds us that employment equity is a major problem in certain professional fields such as medicine and engineering. While most areas of Canada are experiencing a shortage of doctors and medical staff, experts in the field suggest that there are some 10,000 medical personnel across Canada whose foreign credentials are not being recognized by provincial licensing bodies. And this number is considered to be even higher for those qualified in the engineering field.

With specific reference to international policy institutions like Foreign Affairs, International Trade, CIDA, National Defence and Citizenship and Immigration, the author points out that there is a wealth of untapped knowledge in world languages, customs, consumer habits and diplomatic considerations among the visible minority population. Making use of Canada's diversity and knowledge of the world would improve trade and diplomatic relations and help better focus aid and peacekeeping missions. Lastly, Cardozo emphasizes the pivotal role that diverse urban populations must play in the Government's Cities agenda and highlights this point at the beginning of his paper where he contrasts the visible minority population of Markham, Ontario (55%) with the number of visible minority councilors on Markham City Council (zero). In this context, employment equity policies must be seen as a matter of power sharing within the community and representation of the community.

Daniel Hiebert insists that the most important policy goal with respect to the future health of Canada's diverse major cities is the economic goal of improving incomes for visible minority families and individuals. This not only includes credentials recognition but targeted policies that reduce discrimination throughout the job cycle. Second to this policy need is the issue of language training and following closely behind that is the need for affordable housing. Proficiency in English or French is essential to integration and prosperity for visible minority Canadians. The issue of housing is also crucial. Hiebert states that in Toronto alone there are reputed to be about 70,000 households on the social housing waiting list and that the

average time spent on the list is seven years. This reality combined with rising trends in housing prices and rent means that visible minority families will continue to respond by adding more people to each unit in an effort to assemble higher incomes. This problem, known as crowding, could be alleviated with more social housing development and Hiebert sees this issue as central to the Government's Cities initiative.

In terms of general recommendations the author cites the need to improve social networks beyond the ties that bind people within their most intimate circle of friends and family. Although he states that such intimate ties, so-called strong ties, should be enhanced whenever possible, he emphasizes the need to expand so-called weak ties or rather those that may be formed out of acquaintances and casual friendships whether at work, school, in the neighbourhood, or other social settings. Because networks of weak ties are broader in terms of ethnocultural participation there is an opportunity to learn more about the world from such associations and the information available through such ties can be vital to gaining new opportunities for visible minorities. In this context Hiebert also mentions the need for members of the so-called host society to participate more actively in the establishment of weak ties. Hiebert describes this in terms of a responsibility to welcome newcomers but he also invokes the need to develop a normative ideal of urban citizenship that would promote greater levels of civility and conviviality among diverse people in general.

Jacqueline Oxman-Martinez and Jill Hanley state that the policy regimes of the *Canadian Multiculturalism Act*, the *Immigration Act* and *Refugee Protection Act* and the *Canadian Health Act* are the cornerstones of the official federal framework that shapes health maintenance and protection and access to health services, for Canada's diverse communities. They suggest therefore that there is a need for closer examination of these federal policies to determine their combined scope and effectiveness in serving diverse communities. But the authors also acknowledge that the provinces and municipalities are responsible for many of the services that are important to health equity for a diverse population, including provision of health services, labour and housing standards, immigration settlement services (in some cases), etc.

Looking forward, Oxman-Martinez and Hanley suggest that the fact of Canada's increasingly diverse population only accentuates many of the key questions that have circled around multiculturalism and health policy for years now. Although health and social service providers, in general, appear to be interested in learning about how better to serve ethno-racial minority and immigrant populations, how to proceed is less clear. Many unanswered questions include: whether or not publicly funded, culturally specific health and social services should be considered a right or a privilege in Canada; how can we respond to every cultural specificity and would we really want to; and, assuming that we want to maintain standards of quality and safety, how can we evaluate health and social services that exist outside of estern paradigms?

Krishna Pendakur does not offer any detailed or specific policy recommendations but he does provide us with a broader consideration of the goals of Canadian society, to some extent, where he considers the possibilities for integration in the future. Thus he frames his discussion in terms of the likelihood of integration on the one hand vs. enclave formation on the other hand, which he describes as a more polite term for segregation. In terms of projecting circumstances to 2017 Pendakur admits that, if current trends continue in some urban environments, with respect to enclave formation and a parallel segregation of social groups and work environments form according to this same pattern, then we may not get a very ethnically integrated society down the road. Alternatively, he notes, locational preferences are not the same for visible minority immigrants and Canadian-born visible minorities. There may be strong residential segregation among immigrants in Vancouver for example but the same pattern does not hold for Canadian-born visible minorities. This leads the author to hope that the next generation of visible minorities will choose integrated lives, neighbourhoods and workplaces over segregated ones.

In an attempt to remain cautiously optimistic Pendakur recommends promoting integration in terms of the advantages to society as a whole vs. the disadvantages of greater degrees of segregation. Specifically, he argues that immigrant societies can use information, talent and experience from all over to create new economic and social possibilities. He suggests that the best evidence of this exists in our choices for consumption in Toronto or Vancouver, whether in food, restaurants, art, or music.

COMMON THEMES AND CONCLUSIONS

Pendakur's main conclusion, despite his optimism, is that nothing can be said for certain regarding 2017 projections and the hope for a more integrated society. He suggests that optimism may spring from the integrating processes of intermarriage and schooling and from what appears to be better labour market outcomes for visible minority populations that are rising in number and proportion, but the evidence is tentative at best. What is agreed upon among all the authors, however, is that economic integration for visible minorities is the priority issue. Daniel Hiebert puts socio-economic marginalization at the top of the barriers list for visible minorities in terms of factors of integration in Canada's major cities. Oxman-Martinez and Hanley cite poverty as the pivotal influence impacting negatively on the health determinants of visible minorities and Barbara Mitchell traces the origin of many aspects of intergenerational conflict within visible minority families to economic issues, whether the context is that of crowding, child poverty, or elder abuse. She concludes therefore that policies, programs, and services must target visible minority families, especially when they lack economic and social capital resources, at critical points in the life course.

Another, perhaps obvious, theme given the demographic projections context for the Canada 2017 Forum is "what will happen if things don't change"? Several authors considered this in their concluding remarks but perhaps Andrew Cardozo most of all. Cardozo wonders what will happen if nothing changes substantially with respect to the representation of visible minorities in public institutions. In doing so he offers a range of outcomes from a "no one will care"/relative harmony scenario all the way to a potential environment of large-scale political unrest and revolt among ethnic minority groups. Cardozo concludes that the best solution is to foster a proactive agenda for employment equity in particular, and in general to develop a more comprehensive government approach to visible minority issues.

And this last point of Cardozo's leads us to what might be considered the most widely shared theme or conclusion among the 2017 authors, namely, the need for governments to develop a more integrated approach to integration. Oxman-Martinez and Hanley conclude that to the extent that health disparities arise from structural patterns of exclusion or discrimination in health services, they can only be resolved through an integrated policy approach that addresses the multiple and intersecting areas of gender, ethnicity, and socio-economic inequality. similar comment could be made regarding each of the policy domains addressed by the authors. In other words, the challenges that we face with respect to our visible minority populations are not easily compartmentalized challenges that fit neatly under the jurisdictional mandates of individual and separate government departments or programs. These challenges defy such artificial categorization and require a new and better-integrated response from government.

Finally, in an effort to consider visible minority issues beyond the policy silos in which we work on a day-to-day basis, it is vital that we begin to view the barriers that visible minorities face as barriers to citizenship, not formal but substantive citizenship. We often hear that integration is a two-way street in terms of the responsibilities of newcomers and those of the so-called host society, but the challenges of visible minorities are not isolated to the context of immigration and therefore it makes much more sense to speak of citizenship as a two-way street. In doing so we stand a much better chance of bringing the uniquely Canadian ideology of multiculturalism in from the ethnic sidestream and making it a part of the mainstream of government and society. Thus, realizing multiculturalism as the two-way street of citizenship remains our greatest challenge looking forward to 2017.

VISIBLE MINORITIES IN CANADA'S WORKPLACES A PERSPECTIVE ON THE 2017 PROJECTION

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INTRODUCTION

Canada's visible minority population has increased rapidly since the 1960s. Before this, immigration intake from outside Europe, the United States and Australia was severely restricted. In 1961, regional barriers were removed which served to allow substantial intake from Asia and Africa. Forty years ago, only 2 percent of the population (about 300,000 people) could be classified as visible minority. Twenty years later, in 1981, there were about 1.1 million visible minorities living in Canada. Two decades after that, through a combination of immigration, births and intermarriage, the 2001 Census recorded four million visible minority persons.

The last forty years has also seen a massive move toward urbanization and rapid technological change. Further, the last fifteen years has seen stagnant incomes and growing socio-economic polarization (Myles, Morrissette & Picot 1994; see also Hawkins 1988; Myles and Satzewich 1990; Pendakur 2000). Canada is now one of the most ethnically diverse countries in the world. As a result, people are brought face to face with more diversity than ever before at a time when oncoming generations anticipate, for the first time since the 1930s, a less affluent future than their parents (Beaudry & Green 1997). So, an increasingly diverse and growing population is sharing—or fighting over—a pie of resources that might not be keeping up in size.

Such transformations bring both challenges and opportunities. Challenges arise because, in a liberal democracy such as Canada, the state has a responsibility to identify and remove barriers that might create differential opportunity structures across groups. Opportunities arise because, with changes to the social, demographic and ethnic mix of the population can come new ways of doing, thinking and being that could benefit Canadian society. The goal of this paper is to explore the possibilities for the future of our ethnically diverse labour market in the face of these changes.

EMPLOYMENT EQUITY

The *Employment Equity Act* of 1986 classifies visible minorities as “persons, other than Aboriginal peoples, who are non-Caucasian in race or non-white in colour”. This rather clunky definition was created to capture nonwhiteness and to exclude Aboriginals (since they are their own equity group) for policy purposes. The visible minority category is comprised of highly heterogeneous groups with quite distinct migration and social histories; visible minorities include both the Canadian-born and immigrants, and are comprised of both single- and multiple-origin people. The visible minority category includes such diverse groups as Caribbean Blacks who arrived in the 1970s, the descendants of 19th century Japanese migrants, and mixed origin people whose ancestry lies partly in Chinese migrations of the late 19th and 20th centuries. Discussion of the labour market performance and prospects of these highly diverse groups is eased because of four factors: (1) there are several very large distinct ethnic groupings within the visible minority population including Chinese, South Asians and Blacks (comprising predominantly Caribbean, Africans and Canadian-Blacks); (2) there are several common patterns in labour market outcomes shared by the majority of visible minority groups, most notably poor labour market outcomes in comparison with white workers; (3) the heterogeneity of the visible minority population is much smaller within particular cities as compared to Canada as a whole; and (4) Statistics Canada has put great effort into counting and projecting numbers for these population definitions.

In 2001, about one-eighth of Canada's people were visible minorities. This proportion will grow to about one-fifth by 2017 because visible minorities comprise a disproportionate share of immigrants, and because visible minorities disproportionately are of child-rearing age. Canada's visible minority population is predominantly urban and dominated by a few large groups.

Now and into the future, about three-quarters of visible minorities live in Canada's three largest cities of Montreal, Toronto and Vancouver. By 2017, half of the visible minority population will be comprised of two ethnic groups—South Asian and Chinese—with each group numbering approximately 2 million (Statistics Canada 2005).

WHAT ARE VISIBLE MINORITIES?

Despite community based origins (see Pendakur 2000) the term visible minority is somewhat contentious. We use the word visible to denote difference in skin tone, and we use the word minority to denote numerical smallness or weakness in power relations. Both of these elements are somewhat misleading, and grow more misleading over time.

The visibility of non-European origin people is obviously a social construction. Fifty years ago, the eyes of an average person were trained to spot minute differences in ancestry across different parts of the British Isles; the 1951 Census had codes for English, Irish, Scottish, Welsh, Devon, Cornish, and so on. Until 1981, Asia was a birthplace category in public-use census micro data, alongside, for example Belgium and Luxembourg. So, our idea of what constitutes a difference in origin, which is necessary for visibility, changes over time. We may hope that as the diversity of Canadian society grows, our sense of differentness diminishes, and the visibility of ethnic minorities disappears.

Employment Equity programs have operationalized the term visible minority based on the idea of majority whiteness. However, the rapid increase in the numbers of people claiming more than one ethnic origin makes it increasingly difficult to classify individuals as visible minorities. If one's mother is of European origin and one's father of Asian origin, does that make one a visible minority? Given the statistical definition above, it does indeed. However, to the extent that genetic mixing blurs the lines across ethnic groups and blurs variation in skin tone, those claiming multiple-origins do not fit neatly into the white / visible minority dichotomy.

This problem is more than just academic. In 1996, 20% of visible minorities had a European origin in their ancestry (Statistics Canada, 1996 Census PUMF). By 2017 about 20% of the population will be visible minority. However, given that exogamous marriage is increasingly common and that a large part of the growth of the visible minority population is driven by births, it is not out of line to predict that half of the visible minority population could be multiple-origin by 2017.

The import of whether people are classified as visible minorities really hinges on their status as minorities in terms of numbers and power relations. Evidence from the 1990s suggests that people of mixed European and non-European heritage fare no worse in labour markets than people of fully European origin (Pendakur and Pendakur 1998, 2002a). This same evidence shows that people who have no European origin tend to fare worse than those of European origin. So, multiple-origin visible minorities may not be minorities in the same sense that single-origin visible minorities are minorities.

A natural question to ask is: so what? In this situation, it is advisable to create—at the least—population projections that distinguish between single-origin visible minorities and visible minorities with partly European origins. Mechanically, this is not difficult, because the propagation rule that all visible minorities have visible minority children is replaced with the propagation rule that mixed unions create mixed children. Such a projection might give a much different picture of the ethnic mosaic into which we are evolving.

A related question is that of the power structures that condition the lives of visible minorities. Taking for granted the official definition of visible minority, to what extent are visible minorities disadvantaged in labour markets? Recent research suggests that, broadly, visible minority and white earnings were converging between 1970 and 1985, diverging between 1985 and 1995 (Pendakur and Pendakur 2002a), and roughly static between 1995 and 2000 (Pendakur and Pendakur 2005). These results examine only the Canadian-born population and are thus not driven by (first-generation) immigration effects. In 2000, Canadian-born visible minority men earned about 13% less than similarly aged and educated Canadian-born white men (Pendakur and Pendakur 2005). These and other results in the literature (see, especially, Hum and Simpson 1998, Stelcner 2000, Kazemipur and Halli, 2001, Finnie and Meng 2002) offer several relevant lessons: (1) visible minority status

does seem correlated with earnings; (2) some of this correlation can be explained away by individual characteristics such as education or labour market choices such as hours of work, but there is a large residual differential left standing on the shoulders of ethnicity; and (3) these differentials in earnings are persistent in the sense that they do not dissipate with age or over the decades.

As to the numerical smallness of visible minority populations, one may argue that 13% of Canada in 2001 is a small proportion, and even that 20% of Canada in 2017 is relatively small. However, visible minorities are not evenly spread across Canada—almost three-quarters of visible minorities live in the Census Metropolitan Areas of Montreal, Toronto and Vancouver. In Toronto and Vancouver, just under 40% of the urban population is visible minority, and by 2017 it may be over half (Statistics Canada, 2005). This concentration can be more pronounced at the level of the municipality (as compared to the CMA). For example, almost half the population of the City of Vancouver, and almost 60% of that of its suburb, Richmond, is visible minority. So, in the particular areas where visible minorities are most likely to be found, they are hardly minorities.

Do we have any reason to believe that the growth of visible minority populations in Canadian cities will lead to better performance by visible minorities, at least in those particular urban labour markets? Recent work (Pendakur and Pendakur 2002b) suggests that there is a weak positive correlation between the numbers of visible minority residents in a city and the relative earnings of visible minority workers in that city. This work uses cross-sectional variation in populations to identify the effect (i.e. it looks at different cities at a single point in time). More illuminating would be a study of over-time variation within cities to identify the effect of growing visible minority populations on visible minority labour market outcomes. Such information is hard to come by. However, anecdotal evidence for Montreal, Toronto and Vancouver exists (Pendakur and Pendakur 2002a together with Pendakur and Pendakur 2005). Looking at these three cities over 1970 to 2000, we see that in Toronto and Vancouver—both of which experienced massive growth in visible minority populations in the 1990s—there was slight improvement in the relative labour market performance of visible minority men. In contrast, we see that in Montreal—which did not experience as large a growth in visible minority population in this period—there was a slight deterioration in the relative performance of visible minority men. Although in 2000 visible minority men earn less than white men in Canada's three largest cities, the pattern over time suggests that the gap may be narrowing in those cities where visible minority populations are growing.

So what are visible minorities? They may be neither visible nor minorities which suggests that the terminology may be due for an update. However, there are emergent patterns. Visible minorities—defined by the *Employment Equity Act* definition—fare worse in Canada's labour markets than do their similarly aged and educated white counterparts. This holds for both men and women, both in Canada as a whole and in its constituent cities, both for visible minorities as a whole and for its constituent ethnic groups, both currently and over the past thirty years. So, what of the future?

VISIBLE MINORITIES IN 2017

Visible minorities may not be numerical minorities in Canada's largest cities in 2017. Statistics Canada (2005) suggests that approximately half the residents of the Toronto and Vancouver CMAs, and approximately one-fifth of the residents of the Montreal CMA, will be visible minorities by that time. If birth rates for visible minority families should prove slightly higher than those underlying the projections, Toronto and Vancouver could be characterized by visible majorities and white minorities.¹

Numerical size does not capture the key feature of minority status—weak power relations. Although whites comprised only one-fifth of South Africa's population under Apartheid, their economic status was solidly dominant. So, the real question is: can we expect the increasing numbers and proportions of visible minority people in Canada's largest cities to undo some

¹ The scenarios prepared by Statistics Canada assume that the total fertility rate will rise to 1.8 over the course of the projection period. It implicitly assumes that the TFR will rise if the groups with the highest birthrates increase their numerical representation over time.

or all of the existing disparity in labour market outcomes? To answer this question, we must understand the nature of the growth, the degree to which it is correlated with integration and the degree to which it is correlated with better labour market performance.

Although the major part of the growth in visible minority populations will be driven by immigration, at least one million new visible minorities will be born in Canada between now and 2017 (Statistics Canada 2005). So, about one-third of the new visible minorities present in 2017 will be born in Canada, and most of them will have at least one immigrant parent. One might also wonder what proportion of these children will have at least one white parent.

Recent research (Pendakur and Pendakur 1998; 2002) suggests that multiple-origin visible minorities whose origins are partly European face markedly smaller differentials in labour market performance than single-origin visible minorities. If the visible minority population is comprised more of partly European (read: white) origin people, then we may expect a direct improvement in the relative labour market performance of the visible minority population as a whole.

To assess the potential magnitude of this effect on visible minority labour market performance, we need to know more about the future numbers of partly European origin visible minorities and the labour market performance that may be expected of them. Although the results discussed above give us some reason to think that their labour market performance would be relatively good, we do not have formal projections of their numbers over the next decades.

Immigrants to Canada tend to be single-origin, especially non-European immigrants. So, any growth in the visible minority population which is multiple-origin will likely be driven by birth, and by multiple-origin marriages in Canada. In the public-use micro data family file of the 1996 Census of Canada one finds that a little more than 10% of married visible minorities were married to whites. If one restricts the sample to Canadian-born visible minorities only, this proportion rises to more than half. This suggests that our future holds many, many visible minorities with partly European (white) origins who fare comparatively well in our labour markets.

Recent work by Milan and Hamm (2004) of Statistics Canada is illuminating. They examine mixed unions (including common law), where the union is between a member of a visible minority and a non-visible minority, or between two visible minorities. They find that 3.2% of couples were in mixed unions in 2001, up from about 2% in 1991. Most of these were visible minority with non-visible minority. However, not all visible minority groups are equally likely to form mixed unions. The visible minority ethnic origin categories with the highest mixed-union rates are Japanese (70% of all unions), Latin American (45%), or Black (43%) ancestry. Koreans, Chinese, and South Asians were the least likely to be involved in such mixed unions.

Most mixed-origin unions are between visible minority and white partners; hardly any are between visible minority partners of different ethnic groups. The percentage of mixed unions between visible minorities was small, at only 0.4%. But, it is notable that among Canadian-born visible minorities, the propensity to form a mixed-origin union with another visible minority is much higher. Visible minority immigrants tend to marry whites if they marry exogamously, but this tendency is less pronounced among the children of visible minority immigrants (Lessard 2002; Kalbach 2002).

The asymmetry between the propensity of visible minorities to exogamous matching with whites compared to exogamous matching with visible minorities is troubling from the point of view of integrationist goals. In particular, a society truly integrated on ethnic lines would see people marrying people of other ethnic groups with probabilities given only by their relative sizes, and not by their colour. However, regardless of the reason that visible minorities and whites are marrying each other with increasing frequency, a consequence of this is increased numbers of partly European-origin visible minority children over the next decades. If the past is a guide, we should expect these mixed-children to have relatively good labour market outcomes.

In addition to this direct—essentially compositional—effect, there may be an indirect effect of increasing numbers of multiple-origin marriages and children that serves to improve the lot of visible minorities as a whole. In particular, rising rates of inter-ethnic marriage may be a cause or a consequence of rising inter-ethnic tolerance and social integration. Such rising tolerance and integration would naturally lead to less discrimination in labour markets because you can only discriminate on a margin that you can perceive—nobody is stigmatized for an invisible difference. In this case, we may expect that in the coming decades as the social barriers between ethnic groups dissolve, inter-marriage rates rise, and multiple-origin populations rise, ethnic origin may be a less important way of dividing people into identifiable groups. And if people are not in identifiable groups, then they cannot face group-based labour market discrimination.

IDENTITY

The increasing numbers of multiple-origin couples and multiple-origin children in the visible minority population raises the issue of how such couples and children feel about themselves. In particular, do visible minorities *feel* like minorities in the sense of weak players in power relations, and, if so, do multiple-origin visible minorities feel this to the same extent? The answer to this question will depend on how people classify themselves, that is, whether they identify with their ethnic origin or not. Defining an *identity* as a group with which a person feels a connection, it is clear that people have multiple identities because they identify with many groups—perhaps their ethnic group, their soccer team and their profession. Identity has only recently gained attention as an object of study in economics, but at least two themes are important in this context. First, the identities of people affect what they want in life. One's identities condition one's aspirations, goals and actions. Second, identities may be both ascribed and attained. That is, identities correlated with observable things, like skin colour or sex, may be ascribed to us by others unless we work hard to undo that ascription. A young black male in a large American city may be ascribed an identity unless he signals otherwise, and even that may not work very well.

That ethnic identity might affect the desires and aspirations of people suggests that members of different ethnic groups might pursue different goals in the labour market and, for example, end up in different jobs. Here, the difference in labour market outcomes (occupation) would be driven not by any bad behaviour on anyone's part, but rather by the differing desires of people in different ethnic groups. For example, tabulating the occupation distribution by visible minority status of Canadian-born people more than 40 years of age in the 1996 Census public-use micro data, we see that whereas about 2% of whites are professionals, less than 1% of Blacks are professionals and almost 3% of South Asians are professionals. Before we rush to the conclusion that whites discriminate against Blacks but not South Asians, we should allow for the possibility that Black and South Asian people have different preferences. One may get a sense of this by looking at the education distribution of these population subgroups. In these data, about 4.5% of whites and Blacks have university diplomas or degrees above the Bachelor's level, but more than 7% of South Asians have such diplomas. This is consistent with a story for differential labour market performance that rests on different aspirations and goals across ethnic groups. Such a story will hinge critically on how ethnic identity plays out in the educational and labour market choices that people make.

A picture of identity that is all about free choice is, however, fundamentally misleading because identity markers may elicit discrimination and unfair treatment. In this case, identity would affect both the preferences of people and the constraints they face. For example, identity conditioning education choices might go some way to explaining the preponderance of highly educated South Asian-origin professionals, but it is not as good at explaining the lack of Black professionals. In particular, Black and white people have about the same proportion of people with post Bachelor's diplomas and degrees, but Black people have much lower representation among professionals. So, if the influence of identity on labour market aspirations is mediated by educational choices and, if educational choices are unconstrained, then we have evidence that Blacks are unfairly underrepresented in professional occupations.

Ethnic identity may thus affect both the preferences and the constraints faced by people. It affects our preferences by tying us to cultural norms associated with our ethnic identity, norms that place heterogeneous value on characteristics of education and work. These values then condition our choices in education and work. Ethnic identity may affect the constraints we face,

too. In particular, if one's ethnic identity is signaled to others via dress, manner, language use, etc., then it may act as a lightning rod for economic discrimination. For example, whether or not one's identity is partly comprised of Sikh identity may be invisible to others, but if one wears a turban it becomes visible, and so becomes a marker for discriminatory treatment. Distinguishing the effects of ethnic identity on preferences from its effects on constraints is difficult, but we must grapple with these issues if we hope to create a society in which differences in preferences and aspirations are tolerated, but differences in treatment are not.

INTEGRATION

Do we have any evidence that inter-ethnic group differences are dissolving so that inter-ethnic integration is an emergent part of Canadian culture? The evidence here is sparse and mixed. As noted above, because large Canadian cities have experienced large increases in visible minority populations both through migration and birth, they are crucibles for the future of Canada. Pendakur and Pendakur (2002b) find that, looking across cities and ethnic groups, people with lots of co-ethnics residing in their city face smaller earnings disparities than people with few co-ethnics residing in their city. Our interpretation of these data in that paper was that large ethnic populations shield their members from economic discrimination by the majority. An alternative interpretation is that the social barriers between ethnic groups dissolve as minority populations get large and interactions between minority and majority people become more commonplace. As social barriers dissolve, so too, the reasons for discrimination and the lines across which to discriminate dissolve. Thus as minority populations rise in Canadian cities, we may expect ethnically-based economic discrimination to diminish.

Pendakur and Pendakur (2005) provide evidence on the same issue by looking at over-time variation in the earnings differentials faced by visible minorities in Canada's three largest cities over 1970 to 2000. We find only weak evidence that increasing minority populations over time is correlated with diminishing discrimination against visible minorities. Both Toronto and Vancouver saw large increases in visible minority populations over the last 30 years whereas Montreal saw a much smaller increase in that population over those years. Looking at the minority earnings differential by city over time, we see that in 1970, 1980 and 1985 the earnings differential faced by visible minority males in comparison with white males was about 8-10% in all three cities. In 1990, 1995 and 2000, that differential was more than 20% in Montreal. In contrast, although it grew in both Toronto and Vancouver, it grew only to about 15% and 8%, respectively. Thus, the long-term trends for the relative earnings of visible minorities seem better in Toronto and Vancouver, the cities with the largest growth of minority populations. Together these two types of results suggest that increased minority populations really are associated with diminished labour market discrimination against minorities.

Integration is not an evaluative classification; it is descriptive. Neighbourhoods, social groups or work environments are integrated across ethnic lines only if knowledge of a person's ethnic origin is not informative as to which neighbourhood they choose, who their friends are or where they work. Thus, the presence of a large ethnic group does not imply integration. A city may be highly diverse without being integrated if its constituent ethnic groups do not mix in work, social groups or neighbourhoods. Indeed, data from the 2001 Census show that Greater Vancouver has recently seen a spectacular concentration of Chinese origin people in the suburb of Richmond. Although about 17% of Greater Vancouver is Chinese origin, almost 40% of the City of Richmond is Chinese origin. So, as Vancouver has grown more diverse, it may have also grown more segregated.

Is segregation bad? Is integration good? The answers here are not obvious. Vancouver is an instructive example because in the case of the recent migrations from Hong Kong and Taiwan, immigrants have been on the whole reasonably well-off. Thus, one cannot blame the residential segregation on lack of opportunity for Chinese-origin immigrants to live in the neighbourhoods of their choice. Rather it is more compelling to suspect that they do live in the neighbourhoods of their choice, and their choice is to live with other Chinese-origin people. There are many good reasons—Chinese-language shopping, living and working are natural benefits of living in a segregated community within a diverse urban area. We refer to such things as an enclave to get away from the negative connotation of segregation, but it is the same phenomenon. The positive aspects of segregation may be captured simply: to the extent that ethnicity is correlated with preferences, behaviours and language, our lives may be better, cheaper and easier if we live, work and socialize within ethnic groupings.

The negative aspects of segregation—and thus positive aspects of integration—are harder to identify once we accept the legitimacy of a preference for within-group social and economic interaction. I personally feel that sensible arguments for integration, and for public action that encourages integration, must rest on the idea that integrated societies can achieve more than segregated societies. Here, I invoke an efficiency argument of the following type. The edge of an immigrant society over non-immigrant societies is that the immigrant society can use information, talent and experience from all over to create new economic and social possibilities. This kind of effect is easiest to see on the consumption side. Vancouver and Toronto are two of the best cities in the world in which to go out for a meal. The reason is that these two cities have very large immigrant communities which expand the consumption possibilities for everyone. Those of us lucky enough to live in big integrated diverse cities experience this kind of effect all the time in our consumption of groceries, restaurant food, art, and music.

One may also see this effect on the production side. Large segregated diverse cities are, from the production point of view, effectively a collection of smaller homogeneous cities. If there are economies of scale in production—perhaps due to technically or socially increasing returns—then the economy has wider possibilities if the city is integrated than if it is segregated. A collection of small towns is less productive than one big city.

What will Canadian cities look like in terms of integration and segregation in 2017? We observe at least in some urban environments substantial segregation along ethnic origin lines as minority populations have grown. If this type of segregation is a harbinger for the future, and if it is correlated with similarly segregated social groups and work environments, then we may not get an ethnically integrated society. However, it is worth noting that visible minority immigrants have very different locational preferences from Canadian-born visible minorities. Whereas, we see strong residential segregation among immigrants in Vancouver, the correlation between one's own and one's neighbour's ethnic origin is much smaller for Canadian-born visible minorities. So, it is hoped, the next generation of visible minorities will choose integrated lives, neighbourhoods and workplaces over segregated ones.

CONCLUSIONS

We know that visible minority populations are growing constituents of Canada's ethnocultural mosaic, especially in our largest cities. We know that visible minorities marry whites (and of course vice versa) with increasing frequency, which suggests social integration of this populations. But, we also know that in some places increasing residential segregation along ethnic lines suggests the social segmentation of visible minority populations. The evidence on changes in visible minority labour market performance across cities and over time suggests that the integrating processes (like intermarriage and schooling) have dominated the segmenting processes (like residential choice leading to segregation), and that as minority populations rise in number and proportion, they will fare better in Canada's labour markets.

This conclusion is at best tentative. The evidence is equivocal enough to be read in other ways and the future holds patterns that are inherently hard to predict. Even given the upbeat reading of the data presented here, the past may be a poor guide to future patterns in the social, residential and labour market integration of ethnic communities. In the 1990s, few predicted the massive inflow of Chinese origin people into Richmond, the residential segregation of refugee communities, or the rise in inter-ethnic marriage.

Cultural groups exist as such because at least in some domains we prefer our own kind to the ill-defined other. So, there is pressure collectively and privately to segregate in our social and economic lives. But there is also collective and private pressure to integrate. We would all rather live in a colour-blind society. Our gut, our law and our culture tell us as much. There are signals of growing ethnic integration all around us—just look at your table-neighbours the next time you are out for Chinese or Indian food. Whether the pressure to integrate dominates the pressure to segregate is unknown, but I am hopeful. Staring into the future isn't easy, but it is necessary if we are to make that future our own.

REFERENCES

- Beaudry, P. and D. Green. 1997. *Cohort Patterns in Canadian Earnings and the Skill Biased Technical Change Hypothesis*. University of British Columbia Department of Economics Discussion Paper: 97/03, January.
- Finnie, R. and R. Meng. 2002. *Are Immigrants' Human Capital Skills Discounted in Canada?*. Unpublished working paper. Hamilton: McMaster University.
- Kazemipur, A. and S. Halli. 2000. The colour of poverty: a study of the poverty of ethnic and immigrant groups in Canada. *International Migration* 38 (1), 89-108.
- Hawkins, F. 1988. *Canada and Immigration: Public Policy and Public Concern*. Montreal and Kingston: McGill-Queen's University Press.
- Hum, D. and W. Simpson. 1998. Wage opportunities for visible minorities in Canada. *The Income and Labour Dynamics Working Paper Series*. Ottawa: Statistics Canada.
- Kalbach, M. 2002. Ethnic intermarriage in Canada. *Canadian Ethnic Studies* 34 (2), 25-39.
- Lessard, C. 2002. *Intermarriage in Canada*. Working Paper. Ottawa: Strategic Research and Analysis, Department of Canadian Heritage, Government of Canada.
- Milan, A. and B. Hamm. 2004. Mixed unions. *Canadian Social Trends* (Summer 2004), Ottawa: Statistics Canada. Catalogue Number 11-008. Available at Web site: <http://www.statcan.ca/english/studies/11-008/feature/11-008-XIE20040016882.pdf> and <http://www.statcan.ca/Daily/English/040608/d040608b.htm>
- Miles, R. and V. Satzewich. 1990. Migration, racism and 'postmodern' capitalism. *Economy and Society* 19 (3), 334-358.
- Pendakur, K. and R. Pendakur. 1998. The colour of money: earnings differentials across ethnic groups in Canada. *Canadian Journal of Economics* 31 (3), 518-548.
- Pendakur, K. and R. Pendakur. 2002a. Colour my world: has the minority-majority earnings gaps changed over time? *Canadian Public Policy* 28 (4), 489-513.
- Pendakur, K. and R. Pendakur. 2002b. Speaking in tongues: language knowledge as human capital and ethnicity. *International Migration Review* 36 (1), 147-178.
- Pendakur, K. and R. Pendakur. 2005. Glass ceilings. Unpublished manuscript. Ottawa: Statistics Canada.
- Statistics Canada. 2005. Various public-use tables from the 2001 Census of Canada.
- Statistics Canada. 2005. Population Projections of Visible Minority Groups, Canada, Provinces and Regions, 2001-2017, catalogue no. 91-541-XIE, Ottawa.
- Stelcner, Morton. 2000. Earnings differentials among ethnic groups in Canada: a review of the research. *Review of Social Economy* 58 (3), 295-317.

HEALTH AND SOCIAL SERVICES FOR CANADA'S MULTICULTURAL POPULATION: CHALLENGES FOR EQUITY*

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INTRODUCTION

As confirmed in recent studies (CIC, 2004; Statistics Canada, 2004, 2005; Immigration-Quebec, 2004), Canada can continue to expect the cultural diversification of its population. To maintain and improve equity in Canadian health care in this context, it is essential that researchers and policymakers come together to form a better understanding of the relationship between cultural diversity and health, and the challenges this diversity poses to equity in access to health. This paper focuses on the implications of this growing diversity for health and social services in Canada and is intended to stimulate discussion on federal policy priorities in addressing the challenges ahead.

Canada has always been a multicultural country and its changing demographic profile has always had implications for Canada's health and social welfare. First Nations were confronted by the arrival of colonizers from Western Europe^e and, although there were early migrations of Africans, Chinese, Sikhs and other non-Europeans, Canada's 20th century immigrants came most often from Western and Southern Europe before the 1960s. Immigration from other regions rose steadily through the 1960s and 1970s and has surpassed traditional sources of immigrants since 1980 (Statistics Canada, 2004). The top source regions are now Asia and Pacific (providing 51% of immigrants), while Africa and the Middle East together contribute 18% of new immigrants (Hyman, 2001). Given that birth rates are declining among the Canadian-born population, immigration is a significant factor of demographic change; newcomers accounted for more than two-thirds of Canada's population growth in 2001 (Statistics Canada, 2003a). Projections show that, by 2017, one in five Canadians will belong to a visible minority group (Statistics Canada, 2005). These changes demand a revision of our national image, our sense of what is Canadian, to fully reflect this racial and ethnic diversity.

This paper begins with the current thinking on population health and well-being, including biomedical, socio-economic, cultural and migration components. It reviews existing knowledge about the health and social well-being of ethno-racial minorities within Canada, revealing the existence of important disparities from the general Canadian population. The next three sections explore key sources of health disparity: socio-economic, cultural and migration factors. Finally the range of health and social services available in Canada and the way in which they have served diverse populations is identified. We conclude with a discussion of policy priorities for future challenges.

POPULATION HEALTH AND DIVERSITY

Health and social well-being are exceedingly complex, the result of the intersection between a wide variety of factors. The determinants of health proposed by a federal-provincial task force under Health Canada in 1994 are widely accepted among Canadian researchers and policymakers:

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Income and Social Status	Social Environments	Gender
Social Support Networks	Physical Environments	Health Services
Employment/Working Conditions	Personal Health Practices and Coping Skills	Biology and Genetic Endowment
Education and Literacy	Healthy Child Development	Culture

Most of these factors have social rather than bio-medical origins. Health Canada suggests these determinants to aid in understanding bio-medical and psychological health but they can also be applied to individual and collective social health or well-being. One factor not included in this list yet key to our discussion is migration trajectory, migrants' geographical and psychosocial voyage as they make their way from country of origin to country of destination. This involves both the countries visited, but also how they travel and what happens to them along the way. The context leading to the initial departure is taken into account, as is the context into which the person arrives.

Inequalities between Canada's ethno-racial minority populations and the general Canadian population have been documented for each determinant of health (e.g. gender, income, social support networks) in terms of physical health, social and economic outcomes (Khanlou, 2004; Dunn & Dyck, 2000; Leduc & Proulx, 2004; Newbold & Danforth, 2003). There are differences between Canadian-born and immigrants and there are differences among ethnic groups, regardless of how long they have been established in Canadaⁱⁱ. The reasons for these disparities remain poorly understood given that ethnicity involves both socio-cultural and biological components (Anand, 1999). Such health disparities must be understood within a context of intersecting domains of inclusion, exclusion and inequality (Shookner & Chin-Yee, 2003).

Different forms of inclusion and exclusion influence people's lives depending on the ways in which the axes of domination intersect with the systems affecting access to health and well-being (Risman, 2004). For example, gender inequality within public social services intersects with the ethno-cultural settings in which women negotiate their constantly changing positions (Lee, 2000). Like a kaleidoscope—in which each move of the lens (context) shapes the colours and forms observed—power relations, oppression, privileges and disadvantages transform themselves (Okazawa-Rey, 2002). The status of oppressor or oppressed is not static but flexible, fluid and negotiable. Some structural inequalities remain less flexible than others, however (Razack, 2001) and these inequalities are reflected in health outcomes.

In the case of immigrants, researchers have observed what has been termed the healthy immigrant effect: newly arrived immigrants tend to be in better overall health than the general population (Newbold & Danforth, 2003; Hyman & Guruge, 2002; Vissandjee, Desmeules, Cao, Abdool & Kawanjian, 2004). Since immigrants are screened for health problems prior to admittance to Canada and those who are very ill would be unable to travel, this is not in itself surprising. Yet this phenomenon tends to diminish with time, even reversing the disparity, particularly among women and with regard to chronic illnesses (Vissandjee et al, 2004).

Important disparities have also been documented with regards to specific illnesses and/or immigration status. Refugees have higher incidence and mortality rates for cardiovascular, infectious and respiratory diseases and cancer than other immigrants (DesMeules, Gold, Manuel, Payne, Bissandjee, McDermott & Mao, 2004), and Kobayashi, Moore & Rosenberg (1998) show that immigrant children have more health problems than Canadian-born children. Domestic violence has also been found to be more prevalent among more disadvantaged groups. In Canada, rates of domestic violence, including sexual assault, are highest among Aboriginal women (Cohen & Maclean, 2004), and immigrant communities are over-represented in court settings (Oxman-Martinez, Krane & Corbin, 2002).

These dimensions of inequality (e.g. gender, culture, income, education, employment, social support networks, etc.) and the problems emerging from the implementation of the traditional biomedical health model raise the need for action if our goal is equity in health for Canadians of increasingly diverse ethnic backgrounds.

SOCIO-ECONOMIC COMPONENTS OF HEALTH

Of socio-economic factors, poverty is perhaps most pivotal, intersecting negatively with nearly all health determinants. Regrettably, membership in an ethno-racial minority group or being a recently arrived migrant increases a person's likelihood of being poor (Kazemipur & Halli, 2003; Statistics Canada, 2003a; Samaan, 2000). The phenomenon is complex but the role of racism must not be neglected. Adequate income, healthy environment and social position are linked to poverty and influence the health of growing ethno-racial minority and immigrant populations (Health Canada, 1994).

Ethno-racial minorities, whether Canadian or foreign born, face greater economic difficulties than other Canadians and are disproportionately represented in jobs with long hours and low pay (Kazemipur & Halli, 2003; Jackson & Smith, 2002). Immigrants in particular face social differentials related to employment and occupational level (Shields, 2003). The 2001 unemployment rate for new immigrants (25 to 44) was double that of Canadian-born workers (Statistics Canada, 2003b). Women from ethno-racial minorities may face an increased work burden with employment and childcare, generally work in lower-paid jobs, and frequently exercise less control in those jobs (Walters, 2004). These realities create conditions conducive to stress-related illnesses (Anderson, 2000).

Employment conditions create barriers to health due to lack of financial and time resources and lack of employee benefits (Iglesias, Robertson, Johnsson, Engfeldt & Sundquist, 2003). People with low incomes and people of colour more often find themselves in living and work environments that pose a threat to health through poor air quality, contamination of soil, water and building materials, and vulnerability to accidents. Studies in the United States show strong associations between environmental hazards and concentration of ethnic minorities (Northbridge & Shepard, 1997). Race has been shown to be an important variable in studies documenting that people of colour typically have lower incomes than their white counterparts, even when they have higher levels of education (Carey, 2000; Torczyner, 1997), and racism is cited as significant to people of colour's experience in the workplace (Shragge et al, 2004).

Given the higher levels of poverty found among ethno-racial minority and immigrant groups, access to government income security programs is important to well-being and health. For certain categories of immigrants, however, such access is problematic. In the case of last-resort welfare assistance, those with temporary visas are denied access altogether and sponsored immigrants accumulate family debt if they are forced to turn to welfare. Pensions are problematic for immigrants who arrive later in life. Unlikely to be able to find work, they are denied access to Canada's universal pension (Old Age Security) for their first 10 years in the country, even if they are over 65 and already citizens. Afterwards, their pensions often fall below the minimum income provided for other Canadian seniors through the guaranteed income supplement.

The association between education and health status is also well documented. While immigrants, especially seniors, have higher rates of individuals with no formal schooling, working-age immigrants—particularly non-Europeans—have a higher proportion of post-secondary education than Canadians (Dunn & Dyck, 2000). Unlike the Canadian-born population, however, high educational attainment does not necessarily translate into higher income and social standing. Immigrants—and refugees in particular—often find that their human capital has little value in the Canadian labour market (Lamba, 2003).

CULTURAL COMPONENTS OF HEALTH

Cultural beliefs and practices form the foundation of our behaviours intended to protect and promote good health and to treat health problems. The very definitions of health, whether good or bad, are socially and culturally constructed (Oxman-Martinez, Silva, Lach & Poulin de Courval, 2004). Even the relatively culturally monolithic approach used by helping professionals in North America, however, there is a potential gap between the services offered on the one hand, and the services required or expected on the other. Illness experiences are social and cognitive constructions based not only on cultural schemas but also on the multiple intersections of the variables described earlier (Oxman-Martinez, Silva, et al 2004). Canada's increasing cultural diversity indicates that many working definitions of health and health practices are in operation here, something that must be taken into account in health care services.

When health care practices are complementary or interchangeable, access to multiple health care systems can enhance health. Most practitioners of Western medicine or social work, for example, recognise that there are practices within other traditions and cultures that offer more appropriate responses within certain cultural communities, if not for all Canadians. Challenges arise when different systems clash by cancelling out beneficial effects, causing conflict between individuals/families and service-providers or, in the worst of scenarios, actually causing harm.

Gender is a particularly important health determinant that intersects with ethnicity and culture. Gender roles are heavily influenced by culture and cultural gender differences may indicate differences in health practices and eventual health outcomes. Research on immigrant women reveals that they tend to follow traditional health care methods when possible, such as for non-life threatening health conditions and those related to pregnancy and care of infants (Meadows, Thurston & Melton 2001; Choudhury et al, 2002; Liamputtong & Naksook, 2003; Elliot & Gillie, 1998).

While it is widely accepted that Canada's health and social service system must accommodate cultural difference and offer culturally appropriate alternatives, there is also a challenge inherent to such efforts. While it is useful for practitioners and policy-makers to become more informed about cultural differences, one cannot correctly assume that each individual of ethno-racial minority origin will necessarily feel connected to that community or the cultural values held by its majority. In all cultures, including Canada's dominant culture, there are individuals who dissent and choose to live differently from the majority. In dealing with cultural differences, we must avoid essentializing members of different socio-cultural groups and avoid a homogeneous approach to a phenomenon—culture—that is, by definition, ever-changing and variable.

MIGRATION AS A COMPONENT OF HEALTH

With nearly 20% of Canadians born elsewhere (Statistics Canada, 2004), their migration experiences have begun to receive attention as an important determinant of health (Vissandjee et al, 2004; Kinon, 1999). Migration trajectories and experiences in the post-migration phase have direct impacts on migrant health, including fatigue, depression, stress and worry (Elliot & Gillie, 1998). Certain pre-migratory conditions, such as age at migration, geographic location of origin (developing or developed, rural or urban), among others, might affect eventual perceptions of inclusion and exclusion and the access to health and social services. In the case of refugees, the crisis leading to migration can cause both physical and psychological trauma. And in terms of health policy, newcomers' immigration channel—whether permanent or temporary immigrants, refugees, irregular, smuggled, trafficked—also has direct implications for access to public health and social services. Those with precarious immigration statusⁱⁱⁱ are not always eligible for key services or may face waiting periods or limitations to their eligibility (Oxman-Martinez, Hanley et al, 2004).

For those who have latent health problems, migration path and experience may aggravate them, a phenomenon hinted at by the healthy immigrant effect. When migration is difficult, as with human trafficking and smuggling, the trip itself causes vulnerability to accidents, violence, hunger, dehydration and/or exposure to infectious disease (Gushulak & MacPherson, 2000). Post-migratory factors such as port of entry, settlement resources and presence of a social network can also be considered when analysing policies. In the post-migration phase, levels of acculturation, integration and language ability are influenced by migration and have profound health impacts.

Mobility itself creates bridges between health environments; migrants may arrive in Canada carrying diseases that are uncommon in the local population. Immigration policies have made health checks a condition of entry in efforts to avoid costs for the healthcare system in Canada and the spread of infectious disease or pandemics that are less present in Canada. However, controls at entry are not effective for infectious diseases with long periods of latency (Gushulak, 2004). Canada has been broadening its screening to encompass diseases such as HIV that go beyond the traditional focus on immediate epidemic risk. Critics raise the problem of using chronic health problems as a barrier to entry; there is the danger of giving the impression that immigrants are the most important vector for the spread of pandemics and other infectious diseases (Garmaise, 2003).

HEALTH AND SOCIAL SERVICES

The Canadian welfare state has developed a wide range of health and social services intended to promote health and well-being and address problems should they arise. To name a few modes of intervention, services range from preventative, community-based programs to primary health care, to acute care in the case of illness or accident. Social services include such things as settlement services, child protection, social work intervention for individuals with difficulty living in the community (e.g. frail elders, people with minor disabilities and/or mental health problems) or residential centres for those unable to live independently. Despite the wide range of services available, research documents the barriers faced by members of ethno-racial minority or immigrant communities in making use of these services (Li & Browne, 2000; Reitz, 1995). This section focuses on the health care research on this topic but most of the phenomena mentioned are also present in the social service system.^{iv}

Both long-standing cultural communities and recent immigrants can face difficulties accessing the care they need when their cultural values regarding health conflict with the dominant ideology of the health system. When members of cultural minority groups seek care, misunderstandings with practitioners over the meaning of illness, its terminology and its appropriate treatment can undermine the effectiveness of the care (Anderson, 1986; Oxman-Martinez, Hanley et al, 2004). Unfamiliar with the Canadian health system and unaccustomed to seeking professional care for mental and emotional health problems, immigrants suffering from these conditions tend to under-use available services (Elliot & Gillie, 1998).

Language has been described as medicine's most essential technology (Bowen, 2001), enabling all parties in a health encounter to explore an illness or psychosomatic condition. For immigrants, lack of comfort in the host-country language can be a significant barrier to health services (Bowen, 2001; Oxman-Martinez, Silva et al, 2004) and one that will likely increase in importance in Canada, given that the percentage of Canadians whose mother tongue is neither English or French is projected to increase from 17% in 2001 to 21-25% in 2017 (Statistics Canada, 2005). As there is no guarantee of health services in languages other than English and French, non-native speakers may be disadvantaged in communicating their concerns. Interpretation is sometimes provided by governmental agencies or community organizations but it is often left to staff or family members who themselves may not be fluent in both languages, particularly when using specific medical terminology (Weerasinghe & Williams, 2003). The health impact of language discordance between patient and service provider has been well documented, leading to misdiagnosis and even discouraging use of available health care services (Bowen, 2001; Bauer, Rodriguez, Quiroga & Flores-Ortiz, 2000; Bischoff et al, 2003; Kunz & Hanvey, 2000; Meadows et al, 2001).

Although Canadians enjoy universal coverage for most health services, financial barriers remain important. In a survey conducted 1998-1999, 11.2% of respondents indicated that it was cost, above other barriers, that had prevented them from accessing health services the last time they did not receive health care when needed (Wilson & Rosemberg, 2004). Many services are only partially insured or not at all, including dental care, eyeglasses, prescription drugs and fees arising from ambulance and ancillary services. Additional costs may include transportation, unpaid leave from work or childcare. For recent immigrants, the financial barriers are even greater, especially as their relative financial status declines (Statistics Canada, 2003b). Many immigrants arrive without a job, and a three-month waiting period before they are eligible for provincial health insurance applies in several provinces. Studies have shown that few immigrants apply for private health insurance during this time (Elliot & Gillie, 1998).

Language and financial barriers are only the most obvious of several systemic barriers within the health care system. Increasingly, scholars and practitioners are recognizing the need to enhance the cultural competence and gender-sensitivity of health care service provision (Betancourt, Green, Carrillo, & Ananeh-Firempong, 2003; Bowen, 2002; Weerasinghe & Williams, 2003; Vissandjee, Desmeules et al 2004; Gastaldo, Lima, Chakir, Bendris, & Vissandjee, 1998). In some cases, immigrants seeking care experience outright racism. The Ethnic Diversity Survey^{vi} reveals that 36% of visible minorities had been discriminated against or treated unfairly on the basis of their ethno-cultural characteristics in the five years before the survey.

To ensure culturally competent care, training for health care professionals is essential (Vissandjee & Dupere, 2000) but not enough. Cultural competence must also be integrated into governance^{vii}, organizational policy and staff recruitment (Bowen, 2002), a need recognised by the 2001 report of the Commission on the Future of Health Care in Canada (the “Romanow Report”). The report stipulates that health services should become more culturally sensitive, health promotion materials should be written in more than the two official languages, and health care professionals should reflect the diversity of Canadian society and understand the ethnic and cultural backgrounds of the populations they serve (Romanow, 2002).

POLICY FRAMEWORK FOR PROMOTING MULTICULTURAL HEALTH IN CANADA

The health aspects of cultural diversity that have been raised in this discussion exist within a framework of intersecting federal policy regimes. Members of ethnic minorities and recent immigrants face many barriers to health that are best understood when considered within this framework. The policy regimes surrounding multiculturalism, immigration and health are all relevant to an understanding of health and diversity. In this section, these policy areas and their implications for health will be discussed.

The 1988 *Canadian Multiculturalism Act* (CMA) made Canada the first government in the world to officially recognise, protect and promote cultural diversity, as opposed to protecting and promoting particular cultures or as opposed to not taking a stance on culture at all (Berdichevsky, 1994; Ungerleider, 1992). Making references to the *Canadian Human Rights Act* and the *Canadian Citizenship Act*, the International Convention on the Elimination of All Forms of Racial Discrimination, and the International Covenant on Civil and Political Rights, the *Canadian Multiculturalism Act* serves several purposes that are relevant to the topic at hand. Its commitment to “acknowledge the freedom of all members of Canadian society to preserve, enhance and share their cultural heritage” (CMA, 1985) suggests that cultural beliefs and practices around health may be preserved, enhanced and shared. According to the Act, we can assume that “the full and equitable participation of individuals and communities of all origins in the continuing evolution and shaping of all aspects of Canadian society”, including the health system, should be promoted (CMA, 1985). The preservation and enhancement of “the use of languages other than English and French, while strengthening the status and use of the official languages of Canada” (CMA, 1985) is a principle that has great implication for the public health system, as does the Act’s requirement that federal institutions promote equal opportunity and be responsive to the needs of the country’s diverse cultural groups.

The *Immigration and Refugee Protection Act* (IRPA 2001) is another federal law key to diversity and health. The immigration status conferred to newcomers is not only a starting point for determining eligibility for public health insurance but also has profound repercussions for immigrants’ ability to maintain their health or seek help from professionals (Agnew, 1998; Mulvihill, Mailloux, & Atkin, 2001; Oxman-Martinez, Hanley et al, 2004). Of particular concern are those migrants, disproportionately women (CIC, 2003a; 2003b), who have what can be termed precarious immigration status^{viii}, experienced differently depending on gender, age, race, ethnicity, religion, language, social location, and the health and/or migration path used (Oxman-Martinez & Lapierre-Vincent, 2002; Oxman-Martinez, Martinez & Hanley 2001). Such statuses may not confer the right to remain permanently in the country, requiring another application process in order to obtain the permanent right to stay. The order to leave or outright deportation remains a possibility until the final decision is made. Finally, precarious statuses may create dependence on a third party, usually a spouse, family member or employer, who has sponsored the migrant’s entry into Canada. The provinces rely on these categories to define eligibility for public health insurance (Gagnon, 2002) and, as we will see below, these categories have important implications for access to health.

Health Canada is the federal department responsible for promoting, protecting and maintaining the health of permanent residents of Canada. Their basic mandate is to implement the *Canada Health Act* (CHA), the federal law concerning criteria and conditions in respect of provincially insured health services and extended health care services. In line with the Act, provincial health care insurance plans must satisfy the criteria of (a) public administration, (b) comprehensiveness, (c) universality, (d) portability, and (e) accessibility (CHA, 1985, Article 7). Of particular interest here, the Act defines accessibility as such that the provinces “must provide for insured health services on uniform terms and conditions and on a basis that does not impede or preclude, either directly or indirectly whether by charges made to insured persons or otherwise, reasonable access to those services by insured persons” (CHA, 1985, Article 12).

The federal government requires only that permanent residents of Canada be eligible for provincial health plans, thereby excluding many women with precarious immigration status. Although provinces have some leeway for interpretation, the *Canada Health Act* defines those who are eligible for public health insurance as a resident of a province who is “lawfully entitled to be or to remain in Canada who makes his home and is ordinarily present in the province, but does not include a tourist, a transient or a visitor to the province” (CHA, 1985, Article 10). Within the same section of the act (10) it also states that newcomers to a province, including landed immigrants, may be subjected to a delay of no more than three months before being insured.

Together, these three policy regimes, based upon the *Canadian Multiculturalism Act*, the *Immigration and Refugee Protection Act* and the *Canada Health Act*, are the cornerstones of the official federal framework that shapes health maintenance and protection, and access to health services, for Canada’s diverse communities. Although there is a need for close examination of these federal policies, it must also be acknowledged that the provinces and even municipalities are responsible for many of the services that are key to health equity for a diverse population: provision of health services, labour and housing standards, (in some cases) immigrant settlement services, etc. Efforts to respond to increasing diversity must critically examine these policy regimes for their current effects, aiming to reform or adhere to them as appropriate.

LOOKING TO 2017: FORESEEABLE CHALLENGES

Most of this paper has focused on what is already known about health and social services in Canada as they relate to ethno-racial minorities and immigrants. In the sections above, we have presented the way in which a population’s diversity in socio-economic status, cultural origin and migration trajectory intersect with policy to influence health and social well-being. The current inequalities, concerns and challenges that exist within our health and social service system can be expected to be intensified under the scenario of increased diversity by 2017. In many ways, we can simply look at the way things stand at present and project that, in the absence of policy changes to address these problems, they will be maintained or worsened. In this section, however, we would like to ponder the implications of the most central findings of Statistics Canada’s projection of ethno-racial minority and immigrant populations for 2017 (StatsCan, 2005).

To begin, the remarkable growth expected in the visible minority and immigrant populations indicates, on a very basic level, that all of the health issues related to cultural diversity and migration trajectories will increase in importance. This is a very basic statement but one that suggests major challenges to address the questions of cultural competence, gender sensitivity and racism within our public system. The StatsCan study also indicates shifting representation among visible minority groups. South Asians and Chinese, for example, are expected to be the most numerous visible minority groups in 2017 but the West Asian, Korean and Arab populations will be growing more quickly. Each of these groups has different traditions of health and health care, and their shifting proportions indicate the difficulty of tailoring a response to each. Overall, however, there will simply be a larger number of individuals using the healthcare system without necessarily sharing all the cultural reference points of those members of the dominant culture who most actively shape it.

Age is another consideration of diversity. To date, much of the work in culturally appropriate services has been concentrated on women’s reproductive and child health. Given the youthful profile of the visible minority and immigrant communities, this makes sense. By 2017, these populations will remain younger on average than the rest of the population, but the proportion of seniors among them will nevertheless increase. The need for diversity concerns to be incorporated into services for seniors will be a greater challenge than at present. Apart from age, however, is the basic fact that illness and diseases sometimes have different incidences and manifestations among different ethno-racial groups. It seems important to consider how to shift research and treatment money accordingly.

Religion and language are other factors that must be taken into consideration. Islam, Hinduism and Sikhism are projected to increase their adherents (145, 92 and 72% respectively) by 2017. Although members of these religions will only represent about 10% of the population by 2017, their numbers will be concentrated in large cities, and more public institutions will find their presence significant to the delivery of health and social services. Language can also be expected to grow as a

concern with 21-25% of the population speaking neither English nor French as their mother tongue. This increased religious and linguistic diversity will raise the question of whether each variant can be specifically accommodated (e.g. religious services, translation, interpretation) within a public system. If so, how, and if not, how can this diversity be addressed more generally?

The spatial repartition of visible minority and immigrant communities is an interesting phenomenon. As is the case at present, Ontario and British Columbia will continue to have an over-representation of these populations (57 and 20% of the total), and one in three British Columbians are projected to be people of colour by 2017. Visible minority and immigrant populations will also most likely remain concentrated in Canada's largest cities. Toronto and Vancouver may well become cities of visible majorities, although the populations represented within them will differ according to region. In Toronto, South Asians are expected to be most numerous, Chinese in Vancouver and Blacks and Arabs in Montreal. Again, the different ethnic profile in different cities precludes a uniform approach to culturally appropriate services.

The geographic patterns indicate that metropolitan institutions will face markedly different diversity scenarios than small urban centres or rural areas. Although the big centres will need resources and support to address their diverse clientele, diversity will also be increasing in other regions. Smaller centres and rural areas, with less experience and probably fewer resources, are likely to face even greater challenges in serving the smaller and sometimes temporary ethno-racial minority and immigrant populations that settle in their jurisdictions. This is an important consideration since the ability to attract and retain immigrant workers can sometimes be key to these communities' continued viability. In all areas, however, training and hiring of representatives from ethno-racial minority and immigrant communities will be essential. The time to begin encouraging young people to consider these careers is now, however, as is the time to offer resources to allow them to pursue their studies.

The increasing diversity of Canada's population raises some of the essential questions that have circled around the multiculturalism debate in Canada for many years. Health and social service providers appear, overall, interested in learning to better serve ethno-racial minority and immigrant populations. Policymakers are also concerned to do so, seeing it beneficial to all Canadians. How to proceed, however, is less clear. Are publicly funded culturally specific health and social services a right or a privilege in Canada? If they are integrated into the public system, will the expense and the effort create a backlash among the dominant culture population? How can we possibly respond to every cultural specificity and would we really want to? And, assuming that we want to maintain public standards of quality and safety, how can we evaluate health and social services that do not fit into Western paradigms? And if so many of the health and social well-being disparities observed among members of ethno-racial minorities or immigrant communities stem from socio-economic and discrimination problems with origins outside the health and social service system, how can the health and social service system fully address them? How can health and social service practitioners contribute to the reduction of systemic inequalities that are societal in scope?

CONCLUSIONS

The *Canadian Multiculturalism Act* (1988) states that, "the government of Canada recognizes the diversity of Canadians as regards race, national or ethnic origin, colour and religion as a fundamental characteristic of Canadian society and is committed to a policy of multiculturalism". Similarly, according to the *Canada Health Act*, "the primary objective of Canadian health care policy is to protect, promote and restore the physical and mental well-being of residents of Canada and to facilitate reasonable access to health services without financial or other barriers" (CHA, 1985, Article 3). Nevertheless, significant other barriers to access to health services do exist for immigrants and ethno-racial minorities, many of them created by the health care system itself. An increasingly diverse population is unlikely to reduce these barriers.

Despite Canada's strong public health system and official positions aiming to achieve health for all, disadvantaged groups with low socio-economic status, high un- and underemployment, and lack of social support networks have significantly lower life expectancy, poorer health, and higher prevalence of disability than the average Canadian. Members of immigrant and ethno-racial groups have been shown to fall disproportionately into these categories (Kazemipur & Halli, 2003; CIHR, 2003). Many immigrants and ethno-racial minorities may either have limited access to appropriate health services or feel constrained in accessing services even if they are available. This situation must be reversed to avoid further marginalisation in the next decade.

Canada has yet to develop policies to require systematic cultural sensitivity in the health care regimes of all provinces. While some hospitals have begun to develop ad hoc programs and adapt practices to enhance delivery of culturally competent health care services, they have been developed in isolation (Bowen, 2002). The promotion or requirement of multicultural health policies—defined by Weerasinghe et al. (2002) as “reflective, inclusive, responsive and sensitive to the social and cultural values of the diverse ethnocultural communities in Canada”—can help to ensure that health care is culturally sensitive and responsive, assist in avoiding clashes of value systems and grant greater patient autonomy (Weerasinghe & William, 2003).

Application of the biomedical and psychosocial health models has proven insufficient in addressing health disparities that are related to socio-economic and ethno-racial inequality (Weber & Parra-Medina, 2003). To the extent that health disparities arise from structural patterns of exclusion or discrimination in health services, they can only be resolved through an integrated policy approach that addresses the multiple and intersecting areas of gender, ethnicity, and socio-economic inequality. To this end, the potential disparities signalled by projected demographic changes might best be tackled through the establishment of alliances. Different levels of intervention (local communities to senior policy-making) and different policy areas must collaborate to address the social and economic bases of health and illness (Walters, 2004). Policy development must involve the participation of migrants and ethno-racial minorities. An expanded conception of health that includes social relations and institutions—not only individuals—must permeate throughout the decision-making, administrative and service delivery structures. This paper offers a résumé of existing knowledge in Canada about the health care challenges facing our increasingly multicultural population; it is hoped that the discussion it encourages will allow for cooperation between people with different perspectives but similar goals in promoting health equity.

REFERENCES

- Agnew, V. (1998). *In search of a safe place: Abused women and culturally sensitive services*. Toronto, Canada: University of Toronto Press.
- Anand, S. S. (1999). Using ethnicity as a classification variable in health research: Perpetuating the myth of biological determinism, serving socio-political agendas, or making valuable contributions to medical sciences? *Ethnicity and Health*, 4, 241-4.
- Anderson, B. (2000). *Doing the dirty work: The global politics of domestic labour*. London: Zed.
- Anderson, J. M. (1986). Ethnicity and illness experience: Ideological structures and the health care delivery system. *Social Science & Medicine*, 22, 1277-83.
- Bauer H. M., Rodriguez, M. A., Quiroga, S. S., & Flores-Ortiz, Y. G. (2000). Barriers to health care for abused Latina and Asian immigrant women. *Journal of Health Care for the Poor and Underserved*, 11, 33-44.
- Berdichewsky, B. (1994). *Racism, ethnicity and multiculturalism*. Vancouver: Future Publications.
- Betancourt, J. R., Green, A. R., Carrillo, J. E., & Ananeh-Firempong, O. (2003). Defining cultural competence: A practical framework for addressing racial/ethnic disparities in health and health care. *Public Health Reports*, 118, 293-302.
- Bischoff, A., Bovier, P. A., Rrustemi, I., Gariazzo, F., Eytan, A., & Loutan, L. (2003). Language barriers between nurses and asylum seekers: Their impact on symptom reporting and referral. *Social Science & Medicine*, 57, 503-12.
- Bowen, S. (2002). *Cultural competency in paediatric health care: Issues and best practices*. Ottawa: Health Canada.
- Bowen, S. (2001). Language barriers in access to health care. In S. Bowen (Ed.), *Certain circumstances: Equity in and responsiveness of the health care system to the needs of minority and marginalized populations* (89-141). Ottawa: Health Canada.
- Canada Health Act*, R.S. 1985, c. C-6.
- Canadian Institute for Health Research (CIHR). (2003). *Improving access to appropriate health services for marginalized groups*. Ottawa: CIHR.
- Canadian Multiculturalism Act*, R.S. 1985, c. 24 (4th Supp.).
- Carey, E. (2000). Race, income splits Toronto. *Toronto Star Demographics Reporter*. <http://www.geocities.com/CapitolHill/6174/racepoor.html>
- Choudhury, U. K., Jandu, S., Mahal, J., Singh, R., Sohi-Pabla, H., & Mutta, B. (2002). *Health promotion and participatory action research with South Asian women*. *Journal of Nursing Scholarship*, 34, 75-81.
- Citizenship and Immigration Canada (CIC). (2003a). *Facts and figures 2002: Immigration overview*. Ottawa: CIC.
- Citizenship and Immigration Canada (CIC). (2003b). *Facts and figures 2002: Statistical overview of the temporary resident and refugee claimant population*. Ottawa: CIC.
- Citizenship and Immigration Canada (CIC). (2004). *A look at Canada*. <http://www.cic.gc.ca/english/citizen/look/look%2D03e.html>
- Cohen, M. M., & Maclean, H. (2004). Violence against Canadian women. *BMC Women's Health*, 4: S22.
- DesMeules M, Gold J, Kazanjian A, Manuel D, Payne J, Bissandjee B, McDermott S, Mao Y: New Approaches to Immigrant Health Assessment. *Canadian Journal of Public Health* 2004; 95(3): I22-I26.
- Dunn, J. R., & Dyck, I. (2000). Social determinants of health in Canada's immigrant population: Results from the National Population Health Survey. *Social Science & Medicine*, 51, 1573-93.
- Elliot, S. J., & Gillie, J. (1998). Moving experiences: A qualitative analysis of health and migration. *Health and Place*, 4, 327-39.

- Enang, J., Edmonds, S., Thomas Bernard, W., & Davis-Murdoch, S. (2002, April). Developing a health research program: A community capacity building initiative on Black health. Paper presented at the Sixth National Health Promotion conference, Victoria, Canada.
- Gagnon, A. J. (2002). *The responsiveness of the Canadian health care system towards newcomers*. Ottawa: Royal Commission on the Future of Health Care in Canada (Romanow Commission), Health Canada.
- Garmaise D. (2003). Mandatory HIV testing used to bar potential immigrants. *Canadian HIV AIDS Policy Law Review*, 8, 20-1.
- Gastaldo, D., Lima, J., Chakir, F., Bendris, N., & Vissandjee, B. (1998, August). Reproductive and sexual care for Arab Muslim women living in Québec (Canada): Looking at religion, gender and immigration to have a better understanding of health. Paper presented at the International Sociological Association Conference, Montreal, Québec.
- Gushulak, B. (2004, June). Population mobility, migration infectious disease outcomes. In the Seminar on Health and Migration. Symposium conducted at the International Organization for Migration (IOM) International Dialogue on Migration, Geneva, Switzerland.
- Gushulak, B. D., & MacPherson, D. W. (2000). Health issues associated with the smuggling and trafficking of migrants. *Journal of Immigrant Health*, 2, 67-77.
- Health Canada (Federal/Provincial/Territorial Ministers of Health) (1994). *Strategies for population health: Investing in the health of Canadians*. Ottawa: Health Canada.
- Hyman, I., & Guruge, S. (2002). A review of theory and health promotion strategies for new immigrant women. *Canadian Journal of Public Health*, 93, 183-7.
- Hyman, I. (2001). *Immigration and Health*. Ottawa: Health Canada.
- Iglesias, E., Robertson, E., Johnsson, S.E., Engfeldt, P., Sundquist, J. (2003). Women, international migration and self-reported health: A population-based study of women of reproductive age. *Social Science & Medicine*, 56, 111-24.
- Immigration-Québec. (2004). *Living in Québec*.
http://www.immigration-quebec.gouv.qc.ca/vivrequebec/section9/9_2-an.htm
- Immigration and Refugee Protection Act*, 2001, c. 27.
- Jackson, A., & Smith, E. (2002). *Does a rising tide lift all boats? The labour market experiences and incomes of recent immigrants, 1995 to 1998*. Ottawa: Canadian Council on Social Development.
- Kazempur, A., & Halli, S. (2003). Poverty experiences of immigrants: Some reflections. *Canadian Issues*, April, 18-20.
- Khanlou, N. (2004). Influences on adolescent self-esteem in multicultural Canadian secondary schools. *Public Health Nursing*, 21, 404-11.
- Kinon, D. (1999). *Canadian research on immigration and health: An overview*. Ottawa: Health Canada.
- Kobayashi, A., Moore, E., & Rosenberg, M. (1998). *Healthy immigrant children: A demographic analysis*. Ottawa: HRDC, Applied Research Branch.
- Kunz, J. L., & Hanvey, L. (2000). *Immigrant youth in Canada*. Ottawa: Canadian Council on Social Development.
- Lamba, N. K. (2003). The employment experiences of Canadian refugees: Measuring the impact of human and social capital on quality of employment. *The Canadian Review of Sociology and Anthropology*, 40, 45-64.
- Leduc, N., & Proulx, M. (2004). Patterns of health services utilization by recent immigrants. *Journal of Immigrant Health*, 6, 15-27.
- Lee, A. (2000). Working with refugee women. *Canadian Woman Studies*, 20, 105-106.
- Li, H. Z., & Browne, A. J. (2000). Defining mental illness and accessing mental health services: Perspective of Asian Canadians. *Canadian Journal of Community Mental Health*, 19, 143-59.

- Liamputtong, P., & Naksook, C. (2003). Perceptions and experiences of motherhood, health and the husband's role among Thai women in Australia. *Midwifery*, 19, 27-36.
- Meadows, L. M., Thurston, W. E., & Melton, C. (2001). Immigrant women's health. *Social Science & Medicine*, 52, 1451-8.
- Mulvihill, M. A., Mailloux, L., & Atkin, W. (2001). *Advancing policy and research responses to immigrant and refugee women's health in Canada*. Ottawa: Women's Health Bureau, Health Canada.
- Newbold, K. B., & Danforth, J. (2003). Health status and Canada's immigrant population. *Social Science & Medicine*, 57, 1981-95.
- Northbridge, M. E., & Shepard, P. M. (1997). Comment: Environmental racism and public health. *American Journal of Public Health*, 87, 730-2.
- Okazawa-Rey, M. (2002). Warring on women: Understanding complex inequalities of gender, race, class, and nation. *AFFILIA*, 17, 371-83.
- Oxman-Martinez, J., Hanley, J., Lach, L., Khanlou, N., Weerasinghe, S., & Agnew, V. (2004). Intersection of federal policy parameters affecting women with precarious immigration status: A baseline for understanding barriers to health. Manuscript submitted for publication.
- Oxman-Martinez, J., Krane, J., & Corbin, N. (2002). *Competing conceptions of conjugal violence: Insights from an intersectional framework*. Montreal: Centre for Applied Family Studies, McGill University.
- Oxman-Martinez, J., & Lapierre-Vincent, N. (Eds.). (2002). *Precarious immigration status, dependency and women's vulnerability to violence: Impacts on their health*. Montreal: Centre for Applied Family Studies, McGill University and Immigration and Metropolis (domain 4).
- Oxman-Martinez, J., Martinez, A., & Hanley, J. (2001). Trafficking women: Gendered impacts of Canadian immigration policies. *Journal of International Migration and Integration*, 2, 297-313.
- Oxman-Martinez, J., Silva, E., Lach, L., & Poulin de Courval, L. (2004). Depression and ethnicity: A new perspective. Manuscript submitted for publication.
- Razack, S. H. (2001). *Looking white people in the eye: Gender, race and culture in courtrooms and classrooms*. Toronto: University of Toronto Press.
- Reitz, J. G. (1995). *A review of the literature on aspects of ethno-racial access, utilization and delivery of social services*. Report prepared for the Multicultural Coalition for Access to Family Services, Toronto, and the Ontario Ministry of Community and Social Services.
- Risman, B. (2004). Gender as social structure: Theory wrestling with social transformation. *Gender & Society*, 18, 429-50.
- Romanow, Roy. (2002). Building on values: The future of health care in Canada. Ottawa: Privy Council.
- Samaan, R. A. (2000). The influences of race, ethnicity, and poverty on the mental health of children. *Journal of Health Care for Poor and Underserved*, 11, 100-10.
- Shields, J. (2003). *No Safe Haven: Markets, Welfare, and Migrants*. Toronto: Joint Centre of Excellence for Research on Immigration and Settlement (CERIS).
- Shookner, M., & Chin-Yee, F. (2003, June). An inclusion lens: Looking at social and economic exclusion and inclusion. Paper presented at the *Canadian Social Welfare Policy Conference*, Ottawa, Canada. Retrieved November 23, 2004 from <http://ccsd.ca/cswp/2003/papers/abstracts/shookner-chin-yee.htm>
- Shragge, E., Jordan, S., Hanley, J., Posner, L., Luciano, M., & Baltodano, C. (2004). Immigrant workers learning to labour in Canada: Rights and organizing strategies. Manuscript in preparation.
- Statistics Canada. (2003b). Health status and accessing health care services. Retrieved October 19, 2004, from <http://www.statcan.ca/english/freepub/89-611-XIE/health.htm>

- Statistics Canada. (2003c). Longitudinal survey of immigrants to Canada: Process, progress and prospects. Ottawa: Industry Canada.
- Statistics Canada. (2004). Immigrant population by place of birth and period of immigration (2001 census). Retrieved November 2, 2004, from <http://www.statcan.ca/english/Pgdb/demo24a.htm>
- Statistics Canada. (2005). Population Projections of Visible Minority Groups, Canada, Provinces and Regions, 2001-2017. Catalogue no 91-541-XIE, Ottawa.
- Torczyner, J. L. (1997). Diversity, mobility and change: The dynamics of Black communities in Canada. Montreal: McGill Consortium for Ethnicity and Strategic Social Planning.
- Ungerleider, C. S. (1992). Immigration, multiculturalism, and citizenship: The development of the Canadian social justice infrastructure. *Canadian Ethnic Studies*, 24, 7-22.
- Vissandjee, B., & Dupere, S. (2000). Intercultural communication in the clinical context: A question of partnership. *Canadian Journal of Nursing Research*, 32, 99-113.
- Vissandjee, B., DesMeules, M., Cao, Z., Abdool, S., & Kazanjian, A. (2004). Integrating ethnicity and migration as determinants of Canadian women's health. *BMC Women's Health*, 4, S32.
- Walters, V. (2004). The social context of women's health. *BMC Women's Health*, 4, (Suppl 1) : S2.
- Weber, L., & Parra-Medina, D. (2003). Intersectionality and women's health: Charting a path to eliminating health disparities. In M. T. Segal & V. Demos (Eds.), *Gender Perspectives on Health and Medicine: Key Themes* (181-230). New York: Elsevier.
- Weerasinghe, S., & Williams, L. S. (2003, April). *Health and the intersections of diversity: A challenge paper on selected program, policy and research issues*. Paper presented at the Intersections of Diversity Seminar, Niagara Falls, Canada.
- Weerasinghe, S. et al. (2002). *Synthesis report*. Unpublished Health Canada document.
- Wilson, K., & Rosenberg, M. W. (2004). Accessibility and the Canadian health care system: Squaring perceptions and realities. *Health Policy*, 67, 137-148.

ⁱ Canada's very creation came about within a context of massive health upheavals caused by migration. The health implications of European migration to North America were disastrous for the First Nations (INAC, 1996).

ⁱⁱ For example, the Afro-Canadian population in the Maritimes continues to experience serious health disparities despite their long establishment in the country (Enang, Edmonds, Thomas Bernard & Davis-Murdoch, 2002).

ⁱⁱⁱ i.e. those with the possibility of being deported or with legislated dependence on a third party, discussed in detail below.

^{iv} Research in the social services field is less advanced in terms of the barriers and challenges faced by ethno-racial minorities and immigrants, however.

^v Cultural competency refers to understanding, and adapting care to, the patient's socially- and culturally-informed health beliefs and behaviours and the ways in which these factors interact at various levels in the health care system (Betancourt et al, 2003).

^{vi} This survey, with a sample size of nearly 42,500, was conducted in 2002 by Statistics Canada. Percentages are based on total valid responses.

^{vii} Increased representation of ethno-racial minorities in the health care field, particularly on boards of governors and other decision-making bodies, helps to incorporate cultural sensitivity in organizational planning (Kunz & Hanvey, 2000).

^{viii} The IRPA provides for a number of immigration categories that fit this definition: Sponsored Family Member (wife, mother, dependent sister, other); Temporary Resident visas (work, student); Live-in Caregiver Program; Refugee Claimants or Accepted Refugees; Irregular status (without legal immigration papers whether due to expiry of papers, smuggling or trafficking) (IRPA, 2001).

MIGRATION AND THE DEMOGRAPHIC TRANSFORMATION OF CANADIAN CITIES: THE SOCIAL GEOGRAPHY OF CANADA'S MAJOR METROPOLITAN CENTRES IN 2017

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1. INTRODUCTION: IMMIGRATION AND THE POPULATION OF CANADIAN CITIES

The relationship between immigration and the population dynamic of Canada is unmistakable. As demographers and media commentators frequently remind us, immigration is responsible for the lion's share of population growth. It is interesting to note that this balance only arose recently, in the early 1990s. Before that, at every point since formal statistics have been collected, domestic births were the key determinant of population growth. Not any more. According to the latest figures,¹ the number of births in Canada exceeded the number of deaths, in the year ending on June 30, 2004, by around 97,000 persons; net international migration, during the same period, added twice that number to Canada, about 193,000 people. As the demographic projections that are at the heart of the current Canadian Heritage—Statistics Canada 2017 initiative help to demonstrate, the contribution of net migration to total population growth will reach 100 percent some time between now and 2025 (Statistics Canada, 2005). There are two corollaries to this demographic shift that are already well known: the cultural composition of immigrants to Canada has become remarkably globalized in the past few decades; and the process of immigrant settlement in Canada is geographically uneven, and highly concentrated in the largest metropolitan centres, especially Montreal, Toronto and Vancouver.² Metropolitan regions in general, and these three in particular, are therefore at the forefront of Canadian population change, and are becoming more diverse every day. Given the pervasive sense that relatively high rates of immigration will continue into the foreseeable future, increasing diversity will be a fact of life for many years to come.

This brief paper will consider the scale and significance of population change, assuming that immigration is the driving factor in bringing about greater ethnocultural and religious diversity among those Canadians living in metropolitan centres. I begin by summarizing demographic and socio-economic developments that have occurred in the late 20th century, and then provide a basic snapshot of the contemporary scene. In discussing the recent past and the present, I concentrate on the relationship between diversity and social equity, and show that there are aspects of this relationship to celebrate, but also aspects that suggest fundamental concerns. With these issues in mind, the remainder of the paper will consider ways to minimize the possible negative consequences that could accompany this shift to greater diversity. I argue that the benefits of increasing diversity will best be reached by a combination of strategic intervention by government; initiatives that ensure an open labour market; and the activities of non-government organizations.

2. LOOKING BACK: IMMIGRATION AND THE TRANSFORMATION OF CANADIAN METROPOLITAN CENTRES

Before discussing the significance of immigration in recasting the socio-cultural composition of Canadian cities, it is instructive to remember that immigration is just one of several cross-cutting transformations that have been under way in the post-war period. The Canadian economy has shifted dramatically in these years, from an overwhelming emphasis on resources, manufacturing, and commodity trade to the higher-order services that now propel growth (the proverbial shift from an economy based on bricks to one based on clicks). In general, the new economy is characterized by heightened socio-economic polarization that has been exacerbated by a reduction in spending on non-health-related social programs by all levels of government.³

¹ <http://www.statcan.ca/english/Pgdb/demo33a.htm>

² Just over one-quarter of the Canadian-born population resides in these three metropolitan areas, vs. 62 percent of all immigrants, and 74 percent of those who landed in Canada between 1991 and 2001 (Statistics Canada, 2001 Census, Metropolitan Core Tables, Part 1, Table 1).

³ According to the 2004 Budget of Canada (Department of Finance, page 249), OECD figures show that program expenditures by all governments in Canada in 1992 were about the same as in Germany and Italy, 44 percent of GDP, which was exceeded only by France among G7 countries. By 2003 the Canadian ratio of program spending to GDP had fallen to 35 percent, which was about the same figure as Japan and only marginally higher than the corresponding ratio of 33 percent in the USA, the lowest of all G7 countries. The ratio of program spending to GDP gives an approximate indication of the scope of governments to intervene in society.

The nature of families and households has also changed in ways that were largely unanticipated. Certainly, even by the 1960s, commentators began to expect falling birth rates, but few (if any) understood the impacts that would arise from the combination of higher rates of female labour market participation, more prevalent divorce, more prevalent common-law relationships (both heterosexual and same-sex), and declining fertility. Together, these have led to new configurations of households, a restructuring of housing demand, and a concomitant reappraisal of the desirability of residential settings. While many Canadians remain dedicated to acquiring detached suburban homes in upscale subdivisions, this enthusiasm is far from universal.

Land developers and real estate agents have capitalized on emerging sensibilities by upgrading or redeveloping inner-city neighbourhoods to accommodate the growing interest of the new middle class in these settings. In a number of cities, but notably Toronto and Vancouver, this has led to affordability issues for the groups that have traditionally found housing in inner city locations, including immigrants and members of various minorities. Suburban neighbourhoods have also changed. Some retain the traditional landscape of detached houses surrounded by landscaped lawns, but others have come to specialize in the populations formerly associated with the inner city. Significantly, there are food banks operating now in nearly all the suburban municipalities of Greater Vancouver, an outcome that would not have been predicted half a century ago. As suggested by this final point, metropolitan areas are now characterized by variegated social landscapes that include affluence in central areas and poverty in the periphery.

The first point to emphasize in this section is that immigration, and the growing population diversity that results from it, is just one of several dimensions of significant change. Even if immigration slowed to zero, economic change would still take place, as would the reconstitution of family relationships, and the reconfiguration of residential patterns. Secondly, immigration and growing diversity intersect with these other transformations. For example, immigrants entering Canada half a century ago encountered a postwar economy that was booming and that had a high demand for blue-collar workers in resources, manufacturing, and construction. Employers were not especially concerned with educational achievement or even language skills beyond a rudimentary level. Under these circumstances, adult men quickly found work that paid enough to sustain whole families in modest houses near the inner city. Every major Canadian city that received large numbers of immigrants in that era had immigrant districts, such as the St. Lawrence Boulevard corridor of Montreal, and the areas surrounding Spadina Avenue in Toronto, Selkirk Street in Winnipeg, and Commercial Drive in Vancouver. Each of these streets emerged as cultural, social, and commercial hubs of newcomer communities, and in the process became symbolic of the settlement process itself.

In recent years, however, the large volumes of newcomers arriving in Canada have contributed to urban change by settling in new patterns. Suburbs have become primary reception zones in many cases, particularly in Montreal, Toronto and Vancouver. In fact a significant number of Punjabi-speaking immigrants have elected to settle outside the metropolitan boundaries of Greater Vancouver entirely, for example, both to the north and east, as have new Chinese-Canadians in the Toronto region. Recent immigrants are therefore bringing global diversity to these locations on the periphery (or beyond) of metropolitan regions. In the process they establish places of worship, cultural institutions, and commercial centres. Mosques, Gurdwaras, and Hindu temples are therefore now as common in the suburbs as they are in the inner city, as are the Asian theme malls of Richmond, British Columbia, or Markham, Ontario.

There are two radically different ways of interpreting these emerging landscapes: they could be seen as an indication of cultural mixing between host and newcomer (or, in effect, European and visible minority) groups; or they could be seen as new forms of enclave formation. Further, if minority groups are forming enclaves, the extent to which they are economically marginalized is critical. A combination of residential concentration and economic marginalization can lead to the unfortunate result of ghettoization. Before turning to this important question, it is worth pausing to consider the dynamics at work here. What is the relationship between the settlement choices being made by newcomers and members of visible minority groups on the one hand and, on the other, those made by long-term residents of Canada who are mainly of European descent. In the USA, researchers have identified counter-cyclical migration trajectories. In that country, immigrants are

mainly settling in a small number of large cities, while the American born are leaving the same places. That is, international and internal migration systems are moving in opposing directions, leading to a widening gap in the location of immigrants vs. the native-born. The resulting, uneven ethno-cultural patchwork is often interpreted as evidence of white flight (though this conclusion is not universally shared).

Similar counterposed systems appear to be operating in Canada. Between 1991 and 1996, for example, all three of Canada's largest metropolitan centres experienced negative net internal migration and positive international migration. Immigration is accounting for nearly all of the population growth in these centres, since natural increase rates are not much higher than the number leaving them for other parts of Canada. In analyzing these patterns, Ley (2003) is reluctant to invoke a cultural explanation, that is, to see them as evidence of white flight. Instead, he focuses on economic factors and argues that they affect immigrant and Canadian-born populations differently. He finds a high correlation between the volume of immigrants into Canadian cities (specifically Toronto and Vancouver) and house prices. The Canadian-born respond to this development either by avoiding the high-priced metropolitan market or, if they already live there, by cashing in on their rising equity. Immigrants, on the other hand, adjust to rising land and rent costs by adding to their household size and pooling their income. They therefore are able to manage in circumstances that deter most Canadian-born households, although it involves a considerable financial burden. Why do they sacrifice so much to live in expensive housing that they can barely afford? The Longitudinal Survey of Immigrants to Canada suggests an answer: the drive to live near friends and relatives is particularly strong for newcomers, and is the most commonly declared reason for the choice of settlement location. As approximately three-quarters of the immigrants arriving since the 1980s have been visible minorities, the processes that shape immigrant settlement, by default, also shape the social geography of European-origin vs. visible minority groups.

We see particularly complex dynamics at work by turning our attention to the intra-metropolitan scale. Actually, given the changes that have occurred in the way that Statistics Canada classifies cultural ancestry—some subtle and others dramatic—there is no easy way to chart statistically the evolving social geography of Canadian cities. It is therefore impossible to construct comparable ethnocultural categories across census years in the crucial period of the past 30 years. In other projects I have tried to do this and have found that, in the Vancouver case, the situation is extremely complex. Most ethnocultural groups appear to be slowly becoming more distinct, or concentrated, in terms of their residential location, but there are also some that are becoming more dispersed (Hiebert 1999). The extent to which these patterns are meaningful vs. statistical artifacts, though, is debatable.

While it is difficult to chart change over time, current census figures offer an instructive snapshot of the emerging social geography of Canada's major metropolitan centres. Across the three largest centres, the degree of separation between visible minority and European-origin groups is approximately equal, though there is a tendency for groups to be slightly more spatially concentrated in Montreal than Toronto, which is again a little higher than Vancouver (Table 1)⁴. There is also considerable variation between groups. Weighted average Segregation Indices for visible minority groups across the three metropolitan areas suggest that these groups have a greater degree of concentration: West Asians (53.7); Chinese (51.8); Southeast Asians (50.4); Arabs (49.2); Koreans (49.1); and South Asians (48.3). These groups reside in more dispersed patterns: Latin Americans (43.4); Visible minorities (n.i.e.) (43.1); Filipinos (42.6); Blacks (41.3); Japanese (40.1); and Multiple visible minorities (38.9). This spectrum of socio-spatial tendencies defies simple analysis. As already noted, Index

⁴ The most common measure of residential concentration is called the Index of Segregation. It ranges from 0 to 100 and indicates the proportion of a group that would have to relocate for that group to have the same residential distribution as the rest of the population. A value of 0 means the group has exactly the same distribution as the rest of the population, while 100 means the group is completely ghettoized and resides in an area exclusive to itself. There are no inferential statistical tests for this Index, and it is generally interpreted in the following way: values less than 30 are believed to suggest that a group is widely dispersed; values from 30 to 50 are seen as ranging from a low to medium level of concentration; values between 60 and 80 are seen as high concentration; and anything over 80 is seen as extreme concentration. To put this into perspective, Index values for Black/White groups in USA cities typically are in the 80 range, which is the highest general level of residential segregation anywhere in the industrialized world. It is also worth noting that the Index is sensitive to population size and, other things being equal, larger groups should be expected to have smaller Index values.

of segregation values are typically higher for small groups, but in this case two of the largest groups (Blacks and Chinese) occupy opposite ends of the spectrum.⁵ There is no easy socio-economic logic at work either, as there are groups with similar incomes that have quite different geographic patterns (e.g., Filipinos and South Asians).

TABLE 1: GEOGRAPHICAL CONCENTRATION, BY VISIBLE MINORITY GROUP, MTV, 2001

	Montreal		Toronto		Vancouver	
	Population	Ind. Seg.	Population	Ind. Seg.	Population	Ind. Seg.
Total-all groups	3,380,640		4,640,330		1,967,520	
Total visible minority population	458,335	46.5	1,710,110	43.5	725,700	41.1
Chinese	52,115	53.3	408,935	53.1	342,620	50.0
South Asian	57,940	63.9	473,635	44.9	164,320	52.8
Black	139,300	45.9	309,910	39.7	18,460	32.8
Filipino	17,890	74.4	133,310	40.4	57,045	37.8
Latin American	53,160	46.6	75,815	43.0	18,765	36.4
Southeast Asian	39,565	53.9	53,385	48.9	28,550	48.4
Arab	67,830	50.7	42,640	46.1	5,855	53.7
West Asian	11,585	66.5	53,010	50.8	21,415	54.1
Korean	3,760	80.7	42,570	49.4	28,880	44.5
Japanese	2,295	82.4	17,385	45.0	24,025	32.7
Visible minority, n.i.e.	6,780	65.9	66,340	40.2	3,290	56.3
Multiple visible minority	6,110	65.7	33,110	34.9	12,450	36.3
All others (non-visible minority)	2,922,315		2,930,185		1,241,815	
Average, weighted	47.4		44.3		43.6	

Source: Statistics Canada, 2001 Census

The complexity of residential patterns makes it virtually impossible to answer an old question that seems to arise with each new generation of immigrant reception: are residential concentrations of immigrants (or visible minorities) good or bad? It is worth noting that several prominent critics of Canadian immigration and multiculturalism policies believe that these concentrations indicate a lack of social cohesion and are likely to lead to social strife (Collacott, 2002; Francis, 2002; Stoffman, 2002). The recent adoption of regionalization policy—which seeks to redistribute immigrants to centres outside Montreal, Toronto and Vancouver—also appears to be based on the logic that concentrated settlement is a problem. Moreover, the 2003 study conducted by the United Way and Canadian Council on Social Development (*Poverty by postal code*) reports high poverty rates in areas settled by immigrants and visible minorities in the Greater Toronto Area. In 1981, 45 percent of the residents of the most impoverished Census Tracts in the Toronto CMA were immigrants, and 37 were members of visible minority groups; by 2001 those figures had risen, respectively, to 65 and 78 percent. The absolute number of visible-minority individuals experiencing low income is perhaps the most disappointing statistic of all: it

⁵ The category “Black” is difficult, since it is made up of a very wide variety of ethnocultural groups, with different national origins, religious affiliations, languages, and so on. Index values for particular sub-groups are much larger than the one for the group as a whole. For example, the Index value in Vancouver is 70.2 for the 1675 individuals declaring Jamaican descent, and 87.1 for the 720 who declare that they have originated from Trinidad and Tobago. Still, the Index of Segregation is low for Japanese and Filipinos, relatively small groups compared with the Chinese category.

jumped from 60,500 in 1981 to 278,700 in 2001. To put this number into perspective, it exceeds the *total population* of individuals experiencing low income in Newfoundland and Labrador, Prince Edward Island, and Nova Scotia *combined*, as recorded in the 2001 census.⁶

Several points are important to build a more comprehensive understanding of ethnic enclaves and, more generally, the social geography of metropolitan areas. First, the Segregation Indices reported in Table 1 reveal that immigrant and minority groups are not living in exclusive areas in Montreal, Toronto or Vancouver. No group, for example, approaches the Black/White division of social space in many US cities. Secondly, ethnocultural congregation is a double-sided process, on the one hand crystallizing social differences in spatial terms, but on the other providing opportunities for social and economic development (e.g., Peach, 1996). Thirdly, as implied in the previous statement, the relationship between ethnocultural enclaves and socio-economic marginalization is far from clear. I examine the issue of immigrant and visible minority marginalization in greater detail in the next section, but note here the findings of two relevant, recent studies. In the first (Ley and Smith, 1997), based on the 1991 census, the authors found no compelling evidence that immigrants were forming underclass neighbourhoods in Toronto or Vancouver. More recently, Smith (2004) has updated the study with 2001 data and concluded that the overlap between immigrant poverty and ethno-cultural concentrations in Montreal (included in this study), Toronto, and Vancouver has grown. However, she also adds that the social geography of deprived neighbourhoods is both complex and incomplete. The suburbanization of the settlement process has meant that areas of immigrant poverty are neither contiguous nor likely to be in the inner city. This point is corroborated in the UN-CCSD study, which found that six of the Census Tracts with the highest proportions of the population experiencing low income were located in municipalities outside the old City of Toronto, and two of the top five were in Scarborough. Further, these areas tend to house ethnoculturally mixed populations rather than single groups. Finally, with the adoption of official multiculturalism, Canada has enabled—even encouraged—the maintenance of distinct cultural practices. Arguably, cultures are most effectively maintained in the context of geographically concentrated groups, when there are enough people to form a sufficient market for small business development as well as cultural and religious institutions.

Summarizing these last points, the degree of ethnocultural concentration in Canada is actually much less than has been assumed in the popular press or by recent critics. In any case, the development of enclaves may even be seen as a byproduct of multiculturalism. I conclude from this that concern over immigrant/minority residential concentration is largely misplaced. True, there are far-reaching transformations of urban spatial structure under way, and these intersect with immigration, but the specific social geography of settlement is not a problem. The more pressing issue, to which I now turn, is that of marginalization of immigrant and visible minority populations.

3. DIVERSITY AND EQUITY IN MONTREAL, TORONTO AND VANCOUVER

Researchers in the late 1980s began to detect a decline in the relative economic wellbeing of recent immigrants, and these concerns became amplified through the 1990s (Li 2000). Results of the 1996 census only added to this worry, because it was clear that labour market participation rates had fallen for newcomers, as had earnings and overall incomes. The 2001 census, taken at a time of relative economic buoyancy, was seen as a key moment to see whether the pattern of declining fortunes was temporary, related to the weak economy of the early 1990s, or structural. Early analysis of 2001 census figures have yielded results that do not easily lead to a definitive answer to this burning question (Chiu and Zeitsma, 2003). On the more optimistic side, the gap between immigrant and Canadian-born earnings and incomes, which had been growing from 1981-1996, did not increase further. In fact, the situation of male immigrants appears to have been improving relative to the non-immigrant population. But, on the other hand, the situation for female newcomers has actually worsened, relative to the Canadian born (Badets 2003), and the overall gap in earnings (for men and women together) has only improved marginally.

⁶ The numbers living below the Low Income Cutoff in the four Atlantic provinces in 2001 were: 95,270 in Newfoundland and Labrador, 16,735 in Prince Edward Island, 147,020 in Nova Scotia, and 111,370 in New Brunswick (<http://www.statcan.ca/english/Pgdb/famil60a.htm>).

Picot and Hou (2003) have added an important insight into the dynamics of wellbeing among Canadians. Using the main base of the 1981, 1991, and 2001 censuses, they show a pronounced deterioration in the economic situation of newcomers, defined in their terms as immigrants who arrived in the five-year period before the census was taken (Table 2).

TABLE 2: LOW INCOME RATES BY IMMIGRATION STATUS, CANADA, 1980-2000 (%)

	Total	Canadian-born	Immigrants	Recent immigrants*
1980	17.1	17.2	17.0	24.6
1990	15.5	15.1	17.1	31.3
2000	15.6	14.3	20.2	35.8

Source: Picot and Hou, 2003

* Recent immigrants are those who arrived in the 5 years preceding the census

In the early 1980s, recent immigrants were 1.44 times more likely to experience low income than the population as a whole; by 2000 the corresponding figure had risen to nearly 2.3 times. Immigrants who have lived in Canada longer than five years did not fare quite so poorly; their relative rate of low income rose from 1.0 to 1.4 times higher than the total population. Significantly, the situation of the Canadian-born improved dramatically over the same period, with a drop in both their absolute and relative rates of low income. In other words, immigration appears to be associated with an improvement in the level of economic wellbeing for the Canadian born, but the opposite is true for immigrants.

Of course, given the different ethnocultural profiles of the Canadian-born and immigrant populations, these economic trajectories are also registered in terms of those of European origin vs. visible minorities. That is, low income rates are much higher, in general, for Canadians of non-European origin than for the total population, in part because such a high proportion of that group are immigrants. In Canada as a whole, and in each of the three major metropolitan centres, the percentage of the population experiencing low income is almost twice as high for visible minorities as for those not in that category (which includes individuals of European and Aboriginal heritage; Table 3). As these figures imply, this means that even Canadian-born members of visible minority groups face high rates of poverty. Pendakur and Pendakur (2004) have used the main base of each census from 1971 to 1996 to track the earnings rates of visible minority vs. other Canadians. In each case they confined their analysis to those born in Canada. After controlling for key personal features (age, sex, and education), they find that members of visible minority groups suffer a substantial penalty in earnings. The scale of this penalty declined somewhat over the 1970s, but increased in the 1980s and early 1990s. They have also just completed an update of their analysis which shows that little changed in the late 1990s (though the situation did not deteriorate further). This is a rather sobering point. In the period between 1971 and 2001, Canada adopted official multiculturalism, passed the *Human Rights Act* and the *Employment Equity Act*, established the Human Rights Commission, and initiated other measures designed to ensure equitable treatment for all, including members of visible minority groups. However, despite all these measures and regulatory structures, the gap between visible minority and white earnings—with age, gender, and education controlled—is actually larger in 2001 than it was in 1971. In other words, to restate the point made in the previous paragraph more precisely, immigration appears to be associated with an improvement in the level of economic wellbeing for the *Canadian born of European origin*, but the opposite is true for immigrants and visible minorities who are Canadian born.

TABLE 3: PERCENTAGE OF PRIMARY HOUSEHOLD MAINTAINERS BELOW LICO, 2001

	Canada		Montreal		Toronto		Vancouver	
	Total	Im91-01	Total	Im91-01	Total	Im91-01	Total	Im91-01
Total	19.1	38.3	26.5	52.6	18.8	34.8	23.2	42.8
Non-Vis.Min.	17.8	29.3	24.1	41.1	15.0	27.6	19.3	27.8
Visible Minorities	31.1	42.0	46.9	58.4	27.7	37.1	33.2	46.0
Black	36.7	51.4	48.4	62.5	32.9	46.0	32.5	53.2
South Asian	25.4	35.6	48.3	59.6	25.9	35.1	23.2	31.6
Chinese	30.1	43.6	44.9	60.5	26.8	38.1	35.5	50.3
Southeast Asian	31.7	43.0	36.6	52.2	26.5	35.2	43.3	55.2
Filipino	18.9	23.9	34.8	41.0	15.7	19.9	21.2	25.7
Arab/West Asian	43.5	52.5	52.3	60.5	37.8	45.3	46.5	54.7
Latin American	36.0	41.6	49.0	54.8	27.9	30.3	41.4	43.0

Source: Statistics Canada, Metropolis Core Tables, Part 3, Table 2

Thus far, my presentation of the current situation has emphasized problematic issues. Before turning to consider the future, I believe it is essential to acknowledge a particularly positive aspect of immigrant settlement in Canada, one that also has implications for minority groups. There is growing evidence showing that Canadians have developed uniquely favourable attitudes to immigration and immigrants compared with the residents of every other country that is surveyed on these issues. In part, this widespread attitude reflects the fact that there are no significant anti-immigration or anti-minority political parties operating in Canada, as opposed to the case of many other countries (e.g., Smith, 2005). But we can turn this point around: no major movement against these groups has arisen in Canada because there is no political constituency for it. When asked by the Pew Council on Global Attitudes in 2002 whether immigration yields, on balance, more good or bad results, the ratio of Canadian respondents on these answers was 77:18 (PGAP, 2002). This result was unique among the countries surveyed. The good side was supported by less than 50 percent of respondents in every other country, though respondents in the US, France, and Bulgaria came close, with 49, 46, and 42 percent, respectively, expressing this view. Russia represented the opposite extreme of Canada, with only 13 percent believing that immigration brings about positive outcomes. Results of a 2004 IPSOS study were similar, with Canadians much more positive in their assessment of immigration than respondents from any other country (IPSOS, 2004). In a project documenting public opinion in Vancouver, I found that the favourable attitudes about immigration and immigrants were echoed in public perceptions of multiculturalism (Hiebert, 2003). For example, 93 percent of respondents agreed with the statement that Canadians should accept cultural variety, and 91 agreed that Canadians should celebrate diversity.

4. LOOKING FORWARD: TOWARDS NEW METROPOLITAN SOCIETIES

The population projections supplied by Statistics Canada reinforce our understanding that the largest metropolitan centres will attract most of the immigrants to Canada and will therefore house the most diverse populations. Of the scenarios posed by Statistics Canada for 2017, I consider C to be the most likely, which projects visible minority populations of approximately 3.2 million in Toronto (more than half the metropolitan total), 1.4 million in Vancouver (also more than half), and 750 thousand in Montreal (Statistics Canada, 2005). The scale of immigrant populations in the three cities are quite similar and are projected to be 830 thousand in Montreal, 3.1 million in Toronto, and 1.4 million in Vancouver. The emerging social landscapes of Canadian metropolitan centres are unlike anything we have seen before in this country. There are few precedents worldwide, in fact, to the level of diversity that will characterize Canada's largest metropolitan centres in 2017.

This new multicultural reality should be welcomed rather than feared, I believe. However, there is definitely cause for concern about the relationship between minority groups and socio-economic marginalization. If the figures presented in Table 3 hold for the near future, and nearly 35 percent of the immigrant population of the Toronto metropolitan area continues to be classified as below the Low Income Cutoff in 2017, the number in that city *alone* will far exceed the *entire population* of those experiencing poverty in the four Atlantic provinces. In the remainder of this section I discuss a variety of policies that would reduce the degree of marginalization of immigrant and minority groups in Canada's metropolitan centres. I structure my comments, first, around concerns and policy responses that are general and therefore best conducted nationally and, second, around those that are more local.

Before turning to this discussion, I add a caveat. It may seem strange for a geographer to say this, but my view is that focusing on the *landscapes* of immigrant and visible minority poverty in Canadian cities can obscure the real issues at stake. I do not subscribe to a *geographical* solution to the problem of marginalization in Canada—as is exemplified in the rhetoric of regionalization—because I do not believe that the degree of marginalization can be significantly reduced by channeling immigrants to non-metropolitan locations. I do not believe there is any clear evidence showing that concentrated forms of settlement *cause* socio-economic marginalization. Similarly, I strongly suspect that if there were substantial economic opportunities for immigrants and members of minority groups in non-metropolitan communities, we would already be seeing a mass movement towards them.

The first and most important policy response to the problems presented in this paper is already firmly in the public eye and has been discussed at length by others (e.g., see Reitz, 2001, 2004), so I mention it here only briefly. On the subject of immigrants, commentators from a wide variety of backgrounds make the same point: credentials and labour market experience gained before arrival in Canada need to be acknowledged. Arguably, nothing would do more to promote effective integration and social justice for newcomers. The labour market must also become more accommodating to Aboriginal peoples and members of visible minority groups. Processes of discrimination—whether blatant or subtle—operate throughout the job cycle, from the assessment system of applicants at the moment of hiring all the way through to high-level promotions. It is encouraging to see that both federal and provincial levels of government are intensifying their actions on these fronts. For example, the Prime Minister, in 2003, appointed a Parliamentary Secretary to the Minister of Citizenship and Immigration, with special emphasis on the recognition of foreign credentials; furthermore, the ministry of Human Resources and Skills Development Canada is at the moment framing a new “Initiative for a Racism-Free Workplace”. Resolving these stubborn issues would contribute greatly to the wellbeing of immigrants and visible minority groups in metropolitan areas.

The human capital brought by immigrants will best be realized if they acquire an official language, and the provision of English and French training is therefore essential. Unfortunately, the availability of these critical services varies across the country, as provincial jurisdictions are involved. Strange as it might seem to a newcomer to this country, the level of language training provided for immigrants arriving in Newfoundland and Labrador, or Manitoba, for example, is much higher than that offered in British Columbia. In my opinion, this differential is hard to justify.

The issue of housing is also crucial. On a recent trip to Sweden I was led on a fieldtrip by a colleague from the University of Uppsala who showed me some of the housing stock that was created following the plan, adopted in 1965, to build one million new units of social housing over the next ten years. The boldness of that plan, carried out at a time when the national population was 8 million, contrasts sharply with our current situation in Canada. In Canada the stock of social housing is small relative to European countries and its administration is under piecemeal jurisdiction. In Toronto alone there are reputed to be approximately 70,000 households on the social housing waiting list, and average time spent on the list is more than seven years.⁷ The combination of rising housing prices and rents, with rising poverty rates among immigrants and visible minority groups, have led to critical affordability issues (UW-CCSD, 2003; Rose, 2004). As noted earlier, immigrant and visible minority households have responded by adding more people to each unit in an effort to assemble

⁷ <http://www.housingconnections.ca/pdf/annualReports/TSHC%20Annual%20Report%202003.pdf>

higher incomes. But this strategy is associated with crowding and precarious financing. Increasing the stock and availability of social housing, especially in the largest metropolitan centres, would alleviate these problems. Clearly, the emerging cities initiative ought to include social housing as a core element.

Beyond the economy and the bricks and mortar of the housing system, and turning to the local scale, there is also a need to address the way urban societies function. Research in Montreal and Vancouver has been instrumental in exploring the social networks that operate to both help and hinder immigrants (and, by extension, members of visible minority groups) (cf. Germain 2002). Extrapolating from the work of sociologist Mark Granovetter, individuals rely on two types of social relationships to find their way in society (including entering the housing and labour markets as well as educational systems). Most people are embedded in a network of *strong ties* that are shared with family members, close friends, and others who are trusted implicitly. For the most part, strong ties are contained within ethno-cultural or ethno-religious communities but there are also many exceptions to this generalization. Strong ties nurture the individual, especially in times of difficulty, and provide a basis for psychological wellbeing. Weak ties connect people outside this circle of intimacy, and are built out of acquaintances and casual friendships that emerge in school, work, neighbourhood, and other social settings. Networks of weak ties are typically broad and can extend into many groups. They therefore have a great potential to provide vital information about the world. Strong ties exist in close social networks and therefore tend to include people who know similar things... that is, people who have the same social limits.

Social policies will be most effective when they reinforce the networks of both strong and weak ties (Rose, 2004). For immigrants and refugees, this translates, first and foremost, to rebuilding family structures in Canada (strong ties). There is also a need to foster the interaction between people from different backgrounds, or the development of weak ties. Above all, this means that members of the host society need to welcome newcomers, and to adjust their frame of mind to include diverse groups within their commonplace understanding of who *belongs*. As Sandercock (2003) argues, this entails a first step, of enhancing civility, and a second of enhancing conviviality. She sees the Vancouver system of neighbourhood houses (supported by the municipal government) as instrumental in building conversations and everyday understandings across different groups. These arise out of day care and seniors' programs, recreation, and so on—in essence, in daily engagement over local issues. In her work, Sandercock advocates a *normative ideal of urban citizenship*, that is based on “the ethnographic reality of intercultural co-existence, the willingness of host society and immigrant groups and individuals to work together across cultural divides without the fear of losing their own identity.” (p26).

In a fundamental sense, the policy and legal framework of multiculturalism is key for both strong and weak ties, and for the type of citizenship advanced by Sandercock. On the one hand, by enabling cultural retention, systems of strong ties can be nurtured. On the other hand, multiculturalism can foster interaction across cultures in an atmosphere of respect. As Sandercock effectively reminds us, however, local governments have yet to meet fully the challenge of multiculturalism. In particular, the planning system retains, at its core, rules and codified practices that were created out of the European-Canadian experience. Planners conduct their work with sensibilities that are, understandably, shaped by these inherited views. The interests of newcomers, especially those from ethno-religious minorities, are not easily seen or understood within this inherited mindset.

Those who frame local policies and programs need to be aware of several constraints. First, throughout this paper I have emphasized that many immigrants and members of visible minority groups encounter Canadian, or mainstream, society from a position of economic vulnerability. In other words there is a class dimension that pervades the interaction that takes place between planners and other government officials and society, and between social groups. For the particular groups under consideration here, the issues of immigrant credentialization and the openness of the labour market to visible minorities are ever-present. Encouraging social interaction is a noble goal but will not replace these larger issues. Enhancing strong and weak ties will not help very much if the labour market systematically channels immigrants and visible minorities to second-class jobs. Secondly, the reduced scope of government in Canada has meant that the sorts of institutions that are vital to promoting cross-cultural interaction have seen substantial budget cuts in recent years. This has been particularly problematic for the NGO sector, which carries much of the responsibility of delivering settlement services to immigrants,

and conducts advocacy on behalf of visible minorities. Reinvestment in civil society ought to be an essential ingredient in any plan to improve the socio-economic situation of immigrants and visible minority groups. This reinvestment should be conducted between governments and NGOs in partnerships that are based on mutual trust.

Finally, I must return to modify, at least slightly, my earlier dismissal of the geographical concentration of immigrants and minority groups as an issue. The suburbanization of immigrant settlement, minority enclaves, and poverty has taken place quickly and service organizations have yet to catch up. In Greater Vancouver, for example, most of the large settlement organizations are located in the City of Vancouver (though several also have suburban subsidiary offices, and there is one large agency specializing in the Delta/Surrey region in the southeast quarter of the metropolitan area). The level of service in most outlying areas is small relative to the number of potential clients living there, meaning that clients have to deal with a journey to service to obtain the information and help they need. Many newcomers and members of minority groups in these areas rely on public transportation, and the quality of that system is critical to their access to services and therefore their wellbeing. More fundamentally, providing resources for NGOs to reach out to suburbanized immigrant and minority groups should be prioritized.

5. CONCLUDING THOUGHTS

In this paper I have tried to generate a sense of urgency without descending into a sense of despair. The situation is too complex for the latter, but there are definitely sufficient worries to justify the former. If 2017 yields outcomes that simply extend the 1981-2001 trajectory of increasing poverty among newcomers and members of visible minority groups—that is, if things just continue in their present direction—Canadian metropolitan centres will be places of even greater vulnerability and polarization. Without effective intervention, levels of marginalization will surely increase. This intervention has to involve all levels of government and bring in a wide network of institutions, including, of course, those outside government. There are three strengths to build upon in this respect, in my opinion. The first is the remarkably positive level of public support for immigration, diversity, and multiculturalism. This is fundamental. Unlike the case in so many countries, advocacy organizations and governments in Canada do not have to act against the grain of public opinion to improve the wellbeing of designated groups. The second is the breadth and depth of Canadian civil society, especially the organizations dedicated to the cause of immigrants and minorities. It is perhaps unfair to select just one of these organizations as an example, but it is also instructive. The largest (in terms of budget) NGO that provides services to newcomers in Greater Vancouver, SUCCESS, employs about 350 people and benefits from the efforts of 9,000 volunteers. Clearly, the public is engaged in these issues. The third is the patchwork of institutional jurisdictions and systems across Canadian metropolitan areas. Montreal, Toronto, and Vancouver (and other centres, of course) are under different provincial jurisdictions, have different administrative systems, different NGOs, different urban cultures, and so on. This is fertile ground for experimentation with new policies and programs, as long as there is dialogue between the centres and a will to take up successful initiatives regardless of their origin.

REFERENCES CITED

- Badets, J., 2003. "The changing diversity of Canada: The 2001 census". Paper presented at the Sixth Annual Canadian Metropolis Conference, Edmonton, March 23.
- Chui, T. and D. Zietsma, 2003. "Earnings of immigrants in the 1990s", *Canadian Social Trends*, No. 70, Autumn: 24-28.
- Collacott, M. 2002. *Canada's immigration policy: The need for major reform*. Vancouver: The Fraser Institute, Public Policy Sources, Occasional Paper #64.
- Francis, D. 2002. *Immigration: The economic case*. Toronto: Key Porter Books.
- Germain, A. 2002. "The social sustainability of multicultural cities: A neighborhood affair?" *BELGEO, revue belge de géographie* 4: 377-386.
- Hiebert, D. 1999. "Immigration and the changing social geography of Greater Vancouver" *BC Studies* No. 121: 35-82.

- Hiebert, D., 2003. *Are immigrants welcome? Introducing the Vancouver community studies survey*. Vancouver Centre of Excellence Research on Immigration and Integration in the Metropolis, Working Paper Series, No. 03-06.
- IPSOS-Public Affairs, 2004. *Globus: International Affairs Poll*. Associated Press.
- Ley, David. 2003. *Offsetting immigration and domestic migration in gateway cities: Canadian and Australian reflections on an 'American dilemma'*. Vancouver Centre of Excellence Research on Immigration and Integration in the Metropolis, Working Paper Series, No. 03-01.
- Ley, D., and H. Smith. 1997. *Is there an immigrant 'underclass in Canadian cities?*. Vancouver Centre of Excellence Research on Immigration and Integration in the Metropolis, Working Paper Series, No. 97-08.
- Li, P.S., 2000. "Earning disparities between immigrants and native-born Canadians", *Canadian Review of Sociology and Anthropology* 37: 289-311.
- Peach, C. 1996. "Good segregation, bad segregation" *Planning perspectives* 11: 1-20.
- Pendakur, K. and R. Pendakur, 2004. "Colour my world: Has the majority-minority earnings gap changed over time?" *Vancouver Centre of Excellence Research on Immigration and Integration in the Metropolis, Working Paper Series*, No. 04-11.
- Pew Global Attitudes Project (PGAP), 2002. *What the world thinks in 2002*. The Pew Research Center For The People & The Press.
- Picot, G. and F. Hou, 2003. "The rise in low-income rates among immigrants in Canada". *Statistics Canada, Analytical Studies Branch Research Paper Series*.
- Reitz, J.G. 2001. "Immigrant skill utilization in the Canadian labour market: Implications of human capital research" *Journal of International Migration and Integration* 2: 347-378.
- Reitz, J.G., 2004. "Canada: Immigration and nation-building in the transition to a knowledge economy", W.A. Cornelius, T. Tsuda, P.L. Martin, and J.F. Hollifield (eds) *Controlling immigration: A global perspective*. Stanford: Stanford University Press: 79-133.
- Rose, Damaris. 2004. "Immigrant settlement strategies and support needs in Canada's major citirs: Some policy issues". Presentation to the conference on *What makes good public policy in Canadian municipalities?* 28-29 October, 2004, Ottawa.
- Sandercock, L. 2003. *Integrating immigrants: The challenge for cities, city governments, and the city-building professions* RIIM Working Paper #03-20 (www.riim.metropolis.net).
- Smith, C.S. 2005. "Fear of Islamists drives growth of far right in Belgium" *New York Times*. 12 February, 2005.
- Smith, Heather. 2004. *The evolving relationship between immigrant settlement and neighbourhood disadvantage in Canadian cities*. Vancouver Centre of Excellence Research on Immigration and Integration in the Metropolis, Working Paper Series, No. 04-20.
- Stoffman, D. 2002. *Who gets in? What's wrong with Canada's immigration program—and how to fix it*. Toronto: Macfarland Walter & Ross.
- Statistics Canada (2005), *Population Projections of Visible Minority groups, Canada, provinces and regions, 2001-2017*, catalogue no 91-541-XIE, Ottawa.
- United Way and Canadian Council on Social Development (UW-CCSD). 2003. *Poverty by postal code: The geography of neighbourhood poverty, 1981-2001*. Toronto: UW-CCSD.

“PUBLIC INSTITUTIONS AND INSTITUTIONAL CHANGE: DIVERSIFYING THE GOVERNMENT CANADA”

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PART I: INTRODUCTION

It is a cliché to say that Canada is changing rapidly. Thirty years ago if you took a bus ride in the north west end of Toronto you might see two or three non-whites in a city bus at rush hour. Today, you might see two or three white people in that same bus at the same time. This region of Toronto is not alone in its dramatic demographic change—a transformation that is repeated to varying degrees in all mid-size and large cities across the country, while small towns and rural areas have seen relatively little change. This dichotomy too, is part of Canada’s reality.

According to the last census which is now close to four years old, there were some 4 million visible minorities in Canada¹, which is more than the population of all four Atlantic provinces combined. Given immigration and birth rates, it is estimated that there are almost another one million non-whites in Canada since the census of June 2001.²

Statistics Canada estimates that by 2017 the visible minority population could be double that reported in the 2001 census. Projections suggest that the number will be between 6.3 and 8.5 million, a proportion that would be between 19% and 23% of the population overall. The non-Christian population would rise from 5.9% in 2001 to 10.8% in 2017. The allophone population would be in the 20% to 25% range up from 17.2% in 2001. The immigrant population could rise from 18.6% in 2001 to as high as 25.6%.³ And what is really important to keep in mind from a public policy perspective is that these percentages are greatly magnified in the larger urban centres of Canada.

Nevertheless, the power structures are slow to change. Today, Markham is the posterchild of administrations that are slow to change. The city has a visible minority population of some 55% according to the 2001 census. While the white population forms 45% of the residents, the councilors on Markham City Council elected in 2003 are 100% white. This is a democratically elected council and city councils like many other institutions tend to reflect the population of an earlier generation. Voter turnout and voter interest in municipal elections tend to be low, and name recognition is often a key determining factor in election outcomes, so councilors seeking re-election have a higher chance of winning than new candidates. Some of the minorities who did run for office in 2003 were not well known in the community at large and will have to expand their networks before the next election in 2006. There is also evidence that newer immigrants tend to vote municipally in even lower numbers than the rest of the population.⁴

In the introduction section, this paper addresses the challenges and opportunities that our society and our public institutions face in light of the growing cultural, racial and religious diversity. It will address the changes needed in terms of public service recruitment and public policy evolution. Part 2 addresses the reasons for change and Part 3 focuses on how to change. Part 4 is a case study on how change was made in one agency and the closing section deals with some proposals for the future.

¹ Canada: A demographic overview, 2001 (2003) Canadian Heritage

² Estimate by demographer Dr. John Samuel, Carleton University. He points out that in 2003, for example, 88% of arrivals were non-white. Annual immigration rates have been in the 225,000 range.

³ Statistics Canada (2005), Population Projections of Visible Minority Groups, Canada, Provinces and Regions, 2001-2017, catalogue no 91-541-XIE, Ottawa.

⁴ Statistics Canada (2004) Ethnic Diversity Survey; Catalogue no. 89-593-XIE. P. 15. The survey shows a trend of lower voting tendency for the newest immigrants in municipal voting as compared to longer time immigrants and as compared to provincial and federal voting, but does not compare these levels to non-immigrants. Low levels among new arrivals are also corroborated in anecdotal evidence gathered from candidates in Toronto, Markham and Ottawa.

Diversity is not easy. Just think about some of the issues in recent years:

- Sharia and other religious laws
- Attire including the turban and headscarves,
- How to celebrate Christmas and other religious events
- Integration of children in the school system
- Racial profiling
- Police-minority relations
- Security issues in the post 9-11 era
- Employment equity and job discrimination
- Recognizing foreign credentials
- Culturally sensitive health and social services
- Zoning and parking issues for religious places.

Diversity is not all difficult. Think of some of the opportunities:

- Knowledge of the cultures and languages of the world that gives us a competitive edge in international trade
- A professionally trained workforce that fills many gaps in Canada
- A larger pool to draw from in sports and athletics
- An avenue to grow our populace in the face of an ageing population and the related costs
- Cultural traditions, music, art and literature that enrich our society.

As diversity in Canada grows, and as the visible minority communities jointly become the majority in some cities, we should be quite prepared for the problems and the opportunities to grow, become larger and more evident. Preparing ourselves in government and society can best ensure that the challenges are minimized and opportunities are maximized.

Multiculturalism, like any public policy, has its limits, and like every other policy has its extremists, moderates and minimalists. Everything that is demanded in the name of multiculturalism does not have to be realized. However we are benefited by open and respectful dialogue.

The changing face of Canada and the face of the federal public service

As Canada is changing, efforts have been under way to bring more diversity into the federal public service, but till today, it does not remotely resemble Canada's big cities, especially at the senior levels of government.

In defining the role of the public service in modern democratic societies, and Canada in particular, Richard Phidd has compared departments from over a century ago to those now, and demonstrates how government has become involved in many more issues over time. This is for a variety of reasons relating to changing demography, economics, technology and values. He says the resulting professional expertise adds to the dynamics of democracy.⁵

The dynamics of a democracy are enhanced by a bureaucracy that connects well with the citizenry and the diversity of the society. Katharine Esty, Richard Griffin and Marcie Schorr Hirsch describe ten dimensions of diversity that are critical for private and public sector organizations: ethnicity, age, race, hierarchy/status, gender, religion, physical ability/disability, family situation, sexual orientation, and class.⁶ Until the fifties and sixties, the federal public service was overwhelmingly Anglophone, male, white and able-bodied.

⁵ Richard W. Phidd, *Democratic Administration: Public Administration and Democracy*, Department of Political Science, University of Guelph, Lecture presented at York University, September 2002

⁶ Katharine Esty, Richard Griffin and Marcie Schorr Hirsch, *Workplace diversity*, Adams media corporation, Holbrook, Massachusetts, 1995

With the emergence of the official languages policy, in the late sixties, new doors were also opened for the entry of francophones across the board.

In explaining the Royal Commission on Bilingualism and Biculturalism in 1963, Prime Minister Pearson said:

The rapprochement between the two groups requires among other things that English Canada become more aware of the aspirations of French Canada and that French Canada not be too impatient if it finds that this awareness is slow in expressing itself. Some genuine progress is being made from one generation to the next.⁷

Women's participation tended to be limited to some of the secretarial and clerical jobs until the sixties. The impetus for change came from the Royal Commission on the Status of Women which was established in 1967 and reported in 1970; and was a landmark in identifying the need for equality measures by the government. Early measures tended to rely on complaints mechanisms such as the Canadian Human Rights Commission established in 1967. It was not till a decade later that formal, albeit voluntary affirmative action programs were launched. The government shifted from the position of primarily disallowing discrimination against women, to actually affirmatively saying that women's employment had to be increased. In the years (and decades) that followed, women began entering the middle and senior levels of the public service.

Serving the diversity of the people of Canada well is accomplished through at least two means: a diverse workforce and a diversity approach to public policy.

Just as we decided we needed to ensure the inclusion of women and francophones in earlier decades, our more recently identified challenge now is to include the employment equity groups (visible minorities, Aboriginal peoples and persons with disabilities in addition to women), and for the purpose of this of the paper I will focus more on visible minorities.

Just so it does not go unsaid, employment equity by no means ignores the need to have a highly qualified and expert public service.

Merit has always been at the core of public hiring, but is merit as unbiased as it is said to be? Brenda Gross says:

underlying the justification of the use of the merit principle exists a monolithic conception of what merit is and what it means to be the best. Generally, in Canada, merit has had nothing to do with the individual capacities instead it has had to do with the capacities developed in and valued by those who are dominant in terms of general, race, ethnicity and class... in spite of all intentions to be fair the existing meritocracy is biased. Consequently, instead of promoting neutrality and fairness, the merit principle has systematically excluded and disadvantaged members of designated groups.⁸

Qualifications and expertise are of course essential, but when one looks at that amorphous concept of merit and personal suitability, it is important to recognize that these concepts do, or at least should, include the ability to reflect the views of the public, to understand them, ensure that their perspectives are brought forward and that they receive services in a manner that is cognizant of their realities. The sheer ability to understand the citizenry is clearly an issue of merit—after all what good is a bureaucracy that doesn't? Further, if you have a branch of government for example that had no women or no Francophones, you would need to judge that that branch is not suitable to perform its task. Personal suitability, I would argue, is when people bring value-added to the branch. Personal suitability has too long been judged to mean the ability of people to get on with those already there, to fit in, to be able to enjoy informal time with them, chat about the

⁷ Source: Pearson, Lester B. *Text of Speech delivered by the Right Honourable Lester B. Pearson, Prime Minister of Canada, at the Annual General Meeting of the Canadian French Language Weekly Newspaper's Association, August 17, 1963.* Ottawa : Library of Parliament, 1963. 7p.

⁸ Brenda Gross, *Employment Equity and the Merit Principle: Will Ever the Twain Meet?*, M.A. Thesis, Department of Law, Carleton University, Ottawa, August 1988.

hockey game, go for a drink after work, and so on. The Conference Board of Canada referred to this as the “lack of fit” which is an unnecessary employment barrier which their focus groups identified as recently as 2003 and 2004.⁹ This is in fact an age-old barrier, which has been identified for decades and persists till today. In this manner, personal suitability is looking internally at the public servants already there, rather than looking at the public whom the public servants need to serve. Hence I suggest that diversity does add in a very real way to the notion of a meritorious public service. By ensuring a diverse and representative workforce that is of course qualified, we increase the possibility that governing is done better and in a manner that meets the needs of Canadians.

The changing face of Canada and the role of public policy

A second important issue with regard to diversity is ensuring that public policies and services (the outputs) respond to the needs of the diverse population and generally that means responding in more than one department or agency.

So to cite some creative examples from recent and current practices there are a large number of departments that consider Aboriginal issues beyond Indian and Northern Affairs Canada. These include Health Canada, Industry Canada and HRSDC in addition to policies and practices in other departments and agencies. It is worth noting the creation of the Aboriginal Canada Portal (www.aboriginalcanada.gc.ca) which provides links to a number of programs across the federal government, thus allowing a centralized window on a diversified program delivery approach.

Similarly, the official languages policy applies across all departments and agencies. Besides the Commissioner of Official Languages who monitors all federal institutions and reports to Parliament, there are branches in other agencies such as the Public Service Commission, the Canada School of Public Service, Canadian Heritage, the CRTC, the CBC, and other cultural agencies.

So to focus on the subject at hand, institutional change in response to the growing cultural and racial diversity of Canada, one can learn from examples in the Aboriginal and official languages field and consider how they might be adapted.

In planning institutional change we should begin by asking the key questions of why, and how.

PART II: WHY CHANGE

For the “Why”, there are many good reasons for institutional change. A highly appropriate list on the reasons and the priorities was described in the landmark report from 2000, *Embracing Change in the federal public service*, chaired by Lewis Perinbam.

1. The federal public service does not reflect the diversity of the public it serves.
2. As an employer the federal government is not harnessing and nurturing talents it should to compete in the new global economy.
3. The federal government has not achieved its legislated employment equity objectives and goals for visible minorities.
4. The slow process has engendered frustration, discontent and cynicism about the future.
5. A lack of government-wide commitment and leadership, and consequently accountability at the top, has hampered progress.
6. Changing the corporate culture so that it is hospitable to diversity is as essential as getting the numbers up.
7. The government has an opportunity in its recruitment drives to change the face of the public service.
8. The time has come to focus on results.¹⁰

⁹ Conference Board of Canada, *The Voices of Visible Minorities, Speaking out on breaking down barriers*, Briefing September 2004, p.3.

¹⁰ *Embracing Change in the federal public service*, Task force on the participation of visible minorities in the federal public service, Presented to the President of the Treasury Board, 2000. p. 2-3.

Further, the Conference Board of Canada which last year forecast that the visible minority population would be 20% in 2016, points out that Canada will have to compete for talented visible minorities with other countries. This does not display an attitude of “we should help those visible minorities”, but rather, “we better make sure they can help us”.

Labour Canada has identified a 10-point business case for employment equity: it removes the barriers facing 60% of Canada’s labour force, supports inclusion, provides access to a larger pool of human capital for a knowledge-based economy, confronts brain drain and brain waste, replenishes the declining stock of human capital, improves Canada’s competitiveness, assures Canada’s standing as a world leader, pushes the competitive edge, improves human resources management for better planning, and confirms the new thinking that equity and efficiency go together.¹¹

With these reasons in mind, the federal government has been addressing the issues of diversity at key points most notably in the last year:

- The most recent Speech from the Throne last October speaks to our multicultural reality in several ways when addressing values of citizenship, combating racism and aspiring to excellence of cultural institutions.
- In his response to the Throne Speech on October 5, 2004, Prime Minister Paul Martin spoke passionately about defending and promoting our multicultural reality.
- In tabling the most recent annual report on Employment Equity in February 2005, Treasury Board President Reg Alcock said our public service needed to recruit and retain the most qualified and skilled workers, which meant drawing on the talents in the entire population and “building a workforce that truly reflects Canada’s diversity”. He noted that while there was success, the key challenges included the number of visible minorities.¹²
- The Clerk of the Privy Council sets out the corporate priorities of the Public Service of Canada annually to focus attention on areas where he believes significant progress is needed to improve the administration of the public service and meet the expectations of Canadians. Corporate Priorities for 2004—2005 include:

Diversity: accelerating progress in the *Embracing Change* initiative including increases in external recruitment rates for term appointments in excess of three months and indeterminate appointments.¹³

PART III: HOW TO CHANGE

The legislation that is most important to implementing the principle of multiculturalism across all federal departments and agencies is certainly the *Canadian Multiculturalism Act* of 1988 which itself is built on the Multiculturalism Policy of 1971 and the entrenchment of multiculturalism and equality rights in the Canadian Charter of Rights and Freedoms in 1982.

The Act is actually quite rare among federal laws, because it applies to virtually every federal institution but directs each to implement multiculturalism in a different way, i.e. as it applies to its own mandate. By comparison, official languages and environmental legislation that apply widely direct all institutions to implement the same thing—more people working in both languages or similar environmental actions across the board.

In the case of the *Canadian Multiculturalism Act*, Parliament directed all institutions to do what is relevant to their mandate. So how the Department of Fisheries and Oceans implements the Act differs from the way it is done at Industry Canada, the CBC, the RCMP, Health Canada, and HRSDC.

The annual multiculturalism report is one of the best kept secrets in Ottawa. Tabled in the House of Commons by the Multiculturalism minister, it lists the accomplishments of a number of departments and agencies including the ones noted

¹¹ Kamal Dib (senior economist with HRSDC), Diversity works: the payoff—better workers, better results, better business, *Canadian Business*, March 29, 2004.

¹² Public Service Human Resources Management Agency of Canada, Annual Report to Parliament, Employment Equity in the Federal Public service, 2003.04.

¹³ Clerk of the Privy Council, Executive and Deputy Minister Performance Agreements: Strategic Direction for Corporate Priorities for 2004-2005, PCO web site: www.pco-bcp.gc.ca

above. The weakness of the Act is that there are no targets and time tables or measurements, but simply a summarizing of what various departments have reported on. It nevertheless makes interesting reading because it always lists some innovative policies and practices in departments and agencies that make a difference.

Listed below are some examples from the most recent annual report which was tabled in early February 2005:

- One of the best practices noted was in the broadcasting and film policy area, namely the work of the **Canadian Radio-television and Telecommunications Commission (CRTC)**, **Telefilm Canada** and the **Canadian Broadcasting Corporation**. The report notes their efforts to have film and television reflect diversity through tools such as directives, priority setting and funding assistance. (The report could also have listed the work of the **National Film Board** which has been stellar in its embracing of diversity).
- The **Business Development Bank of Canada** has a diversity action committee that informs the employees of diversity issues. Given that a significant proportion of small businesses in Canada are owned by ethnic minorities and new immigrants, they appear to miss the opportunity to use their diversity in their relationship with clients. This is in fact more the approach that is taken by **Export Development Canada** which uses its multilingual capabilities to advance export opportunities.
- **Human Resources and Skills Development Canada** is focusing on the labour market integration of immigrants and addressing issues of foreign credential recognition.
- **Justice Canada** has held focus groups with minority communities on the *Anti-Terrorism Act* to prepare for the review of the legislation currently under way.
- The **Canadian Museum of Civilization** integrates the history of ethnic groups into its exhibits and has specialized exhibits on particular communities.

PART IV

How change was made: The CRTC as a case study

The process of implementing diversity is a complex one which will vary from agency to agency.

The following stages and ingredients of change are presented here as a summarized case study of successful change that has an impact on society at large. As will be evident, change in the federal agency is only a means to an end. The end or the objective always needs to be about how the citizenry will benefit—in this case, how broadcasting services received by Canadians will better reflect Canadian reality.

This case is presented from my own experience, charted over the period of 1997 to 2003 when I was a Commissioner at the Canadian Radio-television and Telecommunications Commission (CRTC). The recently tabled Annual Report on the Operation of the *Canadian Multiculturalism Act* highlights the work of the CRTC in one of two examples of best practices, “that describe comprehensive integrated programs of activities undertaken throughout the years”.¹⁴ One of the reports worth reading is that of the taskforce on cultural diversity of the Canadian Association of Broadcasters, entitled *Reflecting Canadians: best practices for cultural diversity in private television*.¹⁵

As noted earlier, to make successful change of this nature, movement is needed both in policies and services (i.e. the output) and in the administration of the bureaucracy. I will list the policies and services first because that is how the CRTC went about it, even though the more efficient way is generally to get the structure right first. Having said that, it is also important

¹⁴ Annual Report on the Operation of the *Canadian Multiculturalism Act* 2003-2004. Tabled in the House of Commons, February 7, 2005.

¹⁵ Task force on cultural diversity, *Reflecting Canadians: best practices for cultural diversity in private television*, Canadian Association of Broadcasters, July 2004. (<http://www.cab-acr.ca/english/culturaldiversity/report.shtml>) The best practices referred to in the title are actually recommended best practices under 10 useful headings: industry commitment; application and measurement; corporate commitment and accountability; recruitment, hiring and retention; internship, mentoring and scholarships; programming—acquired, independent and in-house production; community connections, internal connections; and external connections. The report is the outcome of a directive from the CRTC to the CAB to establish such a task force and submit a comprehensive report.

to recognize that one cannot always wait to get a reasonable number of people in place and the structure to the optimal level before beginning work on the policy end. In reality, both take place together most times.

These are the stages that were followed at the Commission:

Policy and Service issues:

- (i) Defining the problem, the need, the solution and the objective (what is it you want to do and why)
- (ii) Ensuring that senior management and the department head are onside to give new policy directions
- (iii) Engaging the public—the two key constituencies being the broadcasters and racial minorities, be they community groups or producers
- (iv) Helping the agency understand a cultural paradigm shift if that is needed—addressing diversity not only as multi-lingual broadcasting as in the past, but diversity in mainstream broadcasting
- (v) Assess what can be done within the mandate of the agency, and what will need a mandate (or legislative) change
- (vi) Assessing whether change can be made step by step (*étapisme*) or whether seismic change is needed
- (vii) Finding the best opportunities to make change (ongoing, small and larger decisions)
- (viii) Measuring, reporting and keeping track of policy change
- (ix) Planning for resistance or backlash—explaining the why and the what of the change that was needed.

The strongest argument for change is the economic argument that points to the numbers and the need to reflect the growing population of visible minorities in Canadian society: “Involve them if you want their business. Ignore them at your peril!”

Internal and administrative change

- (i) Ensuring that senior management and the department head are onside to make administrative changes, ensure necessary human and financial resources to conduct change work
- (ii) Explaining the initiative to all concerned within the organization
- (iii) Integrating diversity into all aspects of the work of the agency
- (iv) Employment equity as part of the change process

PART V

Closing: The future

Where do we go from here?

Growth in visible minority population:

It is worth stressing that while the visible minority population in the country is expected to be around 20% by 2017, the percentage in the big cities—two of the economic engines of the country, namely Vancouver and Toronto, will be more than 50%.

According to the 2001 census some of the satellite cities are already in that range. In British Columbia, Richmond had a visible minority population of 59% and Burnaby was at 48.6%, while another seven smaller municipalities were in the 20% to 40% range. In Ontario, Markham was at 55.5% and Mississauga at 40.3%; another four cities were also above 20%. In Quebec, while Montreal was at 22.7%, Saint-Laurent was at 38.2% and Brossard at 27.7%, while another five smaller cities were over 20%.¹⁶ All indications are that these proportions will continue to grow, although I note that they have not specifically in the Statistics Canada projections for 2017.

Employment Equity:

What progress has been made in employment equity can be summed up as follows:

¹⁶ Statistics Canada (2003). 2001 Census results. 25 municipalities with 5000+ population having the highest proportions of visible minorities.

Parts of the private sector have responded well. The most recent figures available are for 2002, when the labour market availability was 12.6 and the representation in the private sector under the Act (federally regulated companies) was at 12.2%. It is worth noting that some sectors did enormously better. In banking, the visible minority representation was at 18.4% and in communications, 11.6% – begging the question by many observers: if they can do it why can't the government? The recalcitrant areas included transportation at 8% and other regulated sectors at 7%.¹⁷

The public service trails in comparison. The most recent report indicates that visible minority representation in 2003-2004 was at 7.8% overall while the labour market availability was upwards of the 2001 level of 10.4%¹⁸. Some 4300 visible minorities have been added to the workforce between 2000 and 2003. The number of visible minority executives has nearly doubled, from 103 to 177 in that period¹⁹, although anecdotal evidence suggests that this is more in the EX1 and EX2 levels and barely so in the EX4 and EX5 levels.

The rate of external recruitment was 5.5 % in 1999-2000, increased to 10% in 2001-2002 and dropped to 9.5% in 2002-2003²⁰. At 1 in 10, external recruitment of visible minorities among new entrants to the public service is also well below the *Embracing Change* 1 in 5 benchmark

Key departments:

There are a number of policy areas, departments and agencies that will need to increase their attention to our diversity in the years ahead. Diversity presents challenges and benefits for society and for public policy. The following institutions or groupings of departments and agencies have a role to further the benefits for the good of all and a responsibility to overcome challenges and barriers. Here are some examples:

(i) Human Resources and the Economy:

HRSDC, Industry Canada, Treasury Board, PSC, PSHRMAC, Canada School of Public service

There are various human resource issues that need attention, in areas such as employment equity in the private and public sectors and the recognition of foreign credentials. For example, while most areas of Canada have a shortage of doctors and medical staff, experts in the field suggest that there are some 10,000 medical personnel across Canada whose foreign credentials are not being recognized by provincial licensing bodies.²¹ The implications for Canadians across Canada are huge. And the number of immigrants with qualifications in the engineering field, who cannot get certified is estimated to be even higher.

Employment equity is not simply an immigrant issue, studies are showing that even Canadian-born minorities face considerable barriers. As noted earlier, employment equity in the federal public service is not proving very successful.²²

(ii) Cultural issues:

Canadian Heritage and the cultural agencies

Through its programs dealing with citizenship, culture and multiculturalism, Canadian Heritage responds to the changing nature of Canadian society. Coming to terms with the changing nature of Canadian culture also presents challenges and

¹⁷ Labour Canada, Annual Report—*Employment Equity Act*, 2003.

¹⁸ Public Service Human Resources Management Agency of Canada, 2003.04. Consulting and Audit Canada estimates the 2003 labour market availability level to be 11.1%

¹⁹ Consulting and Audit Canada, Preliminary evaluation of the *Embracing Change* Initiative, (projects 570-2482 and 570-2504), June 2004, p. 24.

²⁰ Ibid. p. 27.

²¹ These are estimated from organizations such as Worldskills-LASI an Ottawa organization, and the Association of International Physicians and Surgeons of Ontario. AIPSO estimates that there are 4000 doctors in Ontario alone who are awaiting recognition of their credentials; this figure does not include nurses and other health care professionals and those in other provinces.

²² Krishna Pendakur, Simon Fraser University, and Ravi Pendakur, Canadian Heritage, *The Colour of Money: earning differentials among ethnic groups in Canada*, Research on Immigration and Integration in the Metropolis, Working Paper Series, No. 96-03; May 1996

opportunities for this department and the federal cultural agencies.

(iii) Justice and security issues:

Justice, human rights/RCMP/Public Safety

A society that has differences based on race, ethnic origin and religion will inevitably see inequality or allegations thereof. Human rights legislation and the Charter of Rights become valuable tools of seeking justice. On another note, there are sometimes national security issues that are subject of much debate. Ensuring national security while keeping out safety threats is a delicate balancing act that needs constant vigilance.

(iv) International policy issues:

Foreign Affairs, International Trade, CIDA, National Defence and Citizenship and Immigration

With a few million people in Canada whose origins are in virtually every country, there is a wealth of knowledge of the languages, customs, consumer habits and diplomatic considerations of every country. These need to be used more with the meaningful involvement of people of all origins, for the purposes of improving trade, having better informed diplomatic relations, better focused aid and peacekeeping missions.

The Urban/Rural split

The increasing diversity is a reality in mid and large sized cities. So the national Cities Agenda needs to focus on urban diversity as being central to how cities develop. The future of diversity depends on how the issues are addressed in the cities, especially the ten most diverse cities identified in the Statistics Canada projections for 2017.²³

At the same time, one of the noteworthy trends in the projections is that while diversity in the cities, especially the larger ones, will be galloping ahead, the rural areas will remain relatively free of immigrants and visible minorities. Federal policies that focus on diversity should always be cognizant of this disparity. At the same time however, it is worth keeping in mind that rural Canadians do visit or stay in the cities and a considerable number of younger residents move to the cities permanently. From this perspective it is worth noting that it will be beneficial for rural residents to have a better idea about how the urban areas are changing. It is after all part of their country too!

Can we carry on without taking this seriously?

The question that often comes up in discussion on topics of change is: What will happen if government does not change while the population does?

No one can say with certainty how things will work out if employment equity in the public service continues to fail visible minorities across the board, especially in the senior ranks, or if the policies and services of government do not better respond to the racial diversity.

But here are the possible outcomes. On one end of the list of possibilities, no one will care and things will carry on as is, with minor adjustments here and there, all in relative harmony for many years to come. Well, there may be the odd flare-up over things as we see from time to time, such as turbans in the RCMP, or Sharia Law. A new parallel system could emerge, where minorities will remain outside the mainstream and form a new and separate mainstream, divided by race and religion—perhaps even several separate mainstreams. Indeed there is some of this already in some areas of commerce, banking, education, social services and sports.

At some point minorities may begin demanding accountability for the degree to which they are hired or not hired. Minorities are becoming politically involved and may begin demanding their share, using strong tactics on a wide scale such as taking over political parties, demonstrations, or forming new race or religion-based political parties. There is also

²³ Statistics Canada (2005), page 33. The 10 cities are: Toronto, Vancouver, Montreal, Ottawa-Gatineau, Calgary, Edmonton, Hamilton, Winnipeg, Windsor and Kitchener.

the possibility that strong or vociferous demands for action will be met with strong backlash and deep divisions in society along racial and religious lines. In this scenario, minorities may become frustrated at being excluded for so long and will gain power in some areas and once there could seek revenge by throwing out the people they see as their oppressors, i.e. the white establishment and all white people.

My preference would be not to take the risk of finding out the hard way. It would be better to take an active approach on administrative change (primarily employment equity) and policy evolution that responds adequately to our growing diversity.

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BIBLIOGRAPHY

Annual Report on the operation of the *Canadian Multiculturalism Act* (2003-2004)

Canada: A demographic overview, 2001 (2003) Canadian Heritage

Canadian Charter of Rights and Freedoms, 1982

Canadian Multiculturalism Act, 1988

Clerk of the Privy Council, Executive and Deputy Minister Performance Agreements: Strategic Direction for Corporate Priorities for 2004—2005, Web site of the Privy Council Office

Consulting and Audit Canada, Preliminary evaluation of the *Embracing Change* Initiative, (projects 570-2482 and 570-2504), June 2004

Embracing Change in the federal public service, Task force on the participation of visible minorities in the federal public service, Presented to the President of the Treasury Board, 2000

Katharine Esty, Richard Griffin and Marcie Schorr Hirsch, *Workplace diversity*, Adams media corporation, Holbrook, Massachusetts, 1995

Krishna Pendakur, Simon Fraser University, and Ravi Pendakur, Canadian Heritage, *The Colour of Money: earning differentials among ethnic groups in Canada*, Research on Immigration and Integration in the Metropolis, Working Paper Series, No. 96-03; May 1996

Brenda Gross, *Employment Equity and the Merit Principle: Will Ever the Twain Meet?* M.A. Thesis, Department of Law, Carleton University, Ottawa, August 1988

Labour Canada, Annual Report—*Employment Equity Act*, 2003

Public Service Human Resources Management Agency of Canada, Annual Report to Parliament, Employment Equity in the Federal Public service, 2003.04

Lester B. Pearson, Text of Speech delivered by the Right Honourable Lester B. Pearson, Prime Minister of Canada, at the Annual General Meeting of the Canadian French Language Weekly Newspaper's Association, August 17, 1963. Ottawa : Library of Parliament, 1963

Richard W. Phidd, *Democratic Administration: Public Administration and Democracy*, Department of Political Science, University of Guelph, Lecture presented at York University, September 2002

Statistics Canada (2005), *Population Projections of Visible Minority Groups, Canada, Provinces and Regions, 2001-2017*, catalogue no 91-541-XIE, Ottawa

Statistics Canada (2001). 25 municipalities with 5000+ population having the highest proportions of visible minorities

Task force on cultural diversity, *Reflecting Canadians: best practices for cultural diversity in private television*, Canadian Association of Broadcasters, July 2004

CANADA'S GROWING VISIBLE MINORITY POPULATION: GENERATIONAL CHALLENGES, OPPORTUNITIES AND FEDERAL POLICY CONSIDERATIONS

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(1) INTRODUCTION

Over the past several decades, Canadian family life has become increasingly ethnically and culturally diverse as a growing number of immigrants and refugees arrive from Asia, Latin America, Africa and the Middle East. Indeed, the majority of these individuals (approximately 73%) belong to what is euphemistically known as the visible minority population, and is defined by the *Employment Equity Act* as “persons, other than Aboriginal peoples who are non-Caucasian in race or non-white in colour.” It is noteworthy that between 1981 and 2001, the visible minority population almost quadrupled from 1.1 million to nearly 4.0 million. This represents a change from 5% to 13% of the population in 20 years (Statistics Canada, 2003a). Yet, not all visible minorities are foreign-born. According to the 2001 Census, two-thirds of visible minorities are foreign-born, and one third is Canadian born.

It is well-established that visible minority families frequently struggle to maintain their family life in the face of numerous obstacles and challenges. Common problems include discrimination and racism, language difficulties, constricted employment and housing choices, poverty and social exclusion (e.g., Morirov and Kilbride, 2005). These systemic issues can place generational strains on visible minority family members with respect to patterns of family support, exchanges, and the care of children and the elderly. At the same time, visible minority families living in Canada can experience many opportunities, such as the enjoyment of a relatively good standard of living, work and educational opportunities, and the chance to retain and maintain aspects of their cultural heritage. This can have a positive effect on family relationships and bring the generations closer together. For example, children of foreign-born visible minority parents can benefit from a strong educational and health-care system, and this can have provide a number of advantages to them and their families over time. Taken together, these constitute generational challenges and opportunities across the life course for visible minorities.

In light of these issues, the central theme of this report is that examination of visible minority generational issues should adopt a life course lens. This perspective can provide a framework for examining these issues within the context of family transitions, trajectories, and changes in resource availability over time. It can also facilitate an understanding of how cumulative disadvantage (or advantage) over the life course can have important social and economic consequences for individuals, families and society. The specific objectives of this paper are to: (1) define “visible minority families,” (2) briefly highlight current trends and future projections in the composition of the Canadian visible minority population; (3) present a conceptual framework to contextualize visible minority generational challenges and opportunities across the life course (4) review selected research on this topic; and (5) present some recommendations for forward-looking federal policy consideration.

(2) DEFINING VISIBLE MINORITY FAMILIES

Canadians who belong to visible minorities are those who state that they are not white and not Caucasian, and are not aboriginal in their descent. The visible minority population includes the following groups: Blacks, South Asians, Chinese, Koreans, Japanese, Southeast Asians, Filipinos, Arabs and West Asians, Latin Americans and Pacific Islanders. It is also important to note that members of some of these groups (i.e., Blacks) may have originated from many countries, making them heterogeneous (Milan and Tran, 2004).

In the social sciences, definitions of “family” have changed from the “normal nuclear family” to a diverse range of types, largely due to greater prevalence of common-law unions, higher divorce rates, increases in remarriage and blended families, a decline in marriage and fertility, and a growing acceptance of homosexual unions. Rising immigration, especially over the last decade and a half, coupled with shifts in the country of origin of these individuals, has magnified the diversity of Canadian families. This has led researchers to delineate cultural trends, many of which relate to immigration patterns. For example, in some ethnic families, such as Blacks and Asian groups, fictive kin (e.g., godparents and other nonrelatives) often assume family obligations due to the death of a parent or mobility patterns (Riley and Riley, 1996). Research by Salaff (1995) also shows a significant rise in long-distance parenting among Hong Kong immigrants with dual careers, who sometimes must send their children back home to live with relatives because of work demands. Therefore, it is imperative that definitions of families and the changing cultural landscape of Canada be closely linked policy developments in conjunction with current trends and future projections of the growing visible minority population.

(3) CURRENT TRENDS AND FUTURE PROJECTIONS

Recently, Statistics Canada (2005) produced a report with the main goal to “paint a portrait of Canadian diversity in 2017.” This report produces estimations visible minority and immigrant populations and subgroups in Canada between 2001 and 2017, based on a micro-simulation technique. Five scenarios have been produced based on differing assumptions of immigration, fertility, mortality and internal migration. The scenarios are used in this paper to identify four major areas: (1) the growth of the visible minority population and immigration status; (2) age structure and fertility patterns; (3) cultural and religious characteristics; and (4) regional concentration.

(3.1) The Growth of the Visible Minority Population and Immigration Status—The population of visible minority persons in Canada is expected to increase from about 4 million in 2001 to a level estimated between 6.3 million and 8.5 million in 2017, increases of 56% and 111% respectively. In contrast, the remaining population (non-visible minority) is estimated to increase between 1% and 7% over the same period. This would mean that about 1 in 5 Canadians would be a visible minority in 2017 compared to 1 in 8 in 2001. And approximately 1 in 4 (between 21% and 26%) Canadians in 2017 will be foreign-born (immigrants). In 2017 about half of all visible minority persons will be South Asian or Chinese, an increase in population between 2001 and 2107 of about 2 million for each group. Blacks will remain the third largest group (about 1 million in 2017). The fastest growing visible minorities are the West Asian, Korean and Arab groups, more than doubling over that time period and ranging in size from about 200,000 to 425,000 in 2017.

(3.2) Age Structure and Fertility Patterns—In 2017, the visible minority population will have a median age of 35.5, about 8 years younger than the rest of the Canadian population. In 2017, there will be 142 visible minority persons aged 15 to 24 (old enough to join the labour force) for every 100 aged 55 to 64 (old enough to leave the labour force); whereas it is 75 potential entries for every 100 potential exists for the rest of Canada. Turning to fertility, recent immigrants (3/4 of whom are visible minorities) have higher fertility rates than other women. In particular, Black, Arab and Filipino have the highest fertility, whereas Chinese, Korean, and Japanese and West Asian visible minority groups have lower rates.

(3.3) Cultural and Religious Characteristics—It is projected that by 2017 between 21% and 25% of the total population of Canada will have mother tongues that are neither English nor French, compared to 17% in 2001. The religions with the fastest growth during this time period will be Islam (145% increase), Hinduism (92% increase), and Sikhism (72% increase).

(3.4) Regional Concentration—In 2017, Ontario will have 57% and B.C. will have 20% out of the total visible minority population in Canada, or 77% combined. There will also be considerable variation by metropolitan areas. Almost 75% of all visible minority persons will be living in Toronto, Vancouver and Montreal in 2017. Furthermore, in 2017, more than half of the Toronto CMA will belong to a visible minority group under 4 of the 5 projected scenarios, and more than half of Canada’s South Asians will be living in that city. Montreal will be mainly comprised of Blacks (27%) and Arabs (19%).

(4) A LIFE COURSE/ECOLOGICAL FRAMEWORK

While these projections provide us with important trends, it is also useful to supplement this material with a conceptualization of how this growing population can experience unique generational challenges and opportunities. In particular, we need to consider how these generational relationships are affected by specific characteristics and transitional behaviours and link these to various environmental contexts. Thus, an applied life course/ecological framework is presented in Figure 1 drawing from the work of Bronfenbrenner (1979; 1986), Schiamberg and Gans (1999), Elder (1978) and Mitchell (2003). These theories have been used to explain patterns in education and work, social work, the health professions, family therapy and public policy. As such, this perspective provides guidance to professionals and policy makers in designing, delivering and evaluating government programs and services (Westney, 1993).

Two key tenets of a life course perspective that have relevance for this paper include an emphasis on diversity in access to resources (e.g., economic and social) during transitional periods, and the effect of these changes on other family members, especially from an intergenerational viewpoint. Synthesized with an ecological approach, four levels of environmental systems can also be identified. These are differentiated on the basis of their immediacy with respect to the family unit, posited as: micro-, meso- exo-, and macrosystems (Bulboz and Sontag, 1993). Each of these levels will be briefly described in relation to the conceptual framework and the key research themes and issues, which will be presented in the next section.

The generational relationship is conceived as a principal microsystem context in which family development and support takes place, and is affected by cultural heritage, membership or identification, age, transitional events and life course stage, gender, proximity and distance, the exchange of instrumental and affective support, caregiving and dependency issues, and health status and well-being. The mesosystem focuses on the direct relationship or interaction of the family or generational relationship with the external environment, for instance, work and school settings can provide individuals and families with access to opportunities and resources (e.g., employment income, access to other services). The exosystem constitutes the external environment in which members of the generational unit affect other family members and includes work and school settings (e.g., day care); community/neighborhood characteristics and social networks (Hou and Picot, 2004). The previous three systems (micro-, meso-, and exosystems) are embedded in the macrosystem. This system includes broad ideological values, norms, government policies, and institutional patterns of a particular society.

The importance of changes that occur over time in these interlocking systems constitutes the chronosystem. This entails consideration of life course transitional events (e.g., pre and post-immigration, school, work and parenthood transitions) and trajectories that may have short and long term effects that are relevant for policy development (e.g., see Frank and Kunz, 2004). Moreover, it is crucial to recognize that many life course experiences (such as family change or reunification, health, and mobility) may result in cumulative disadvantage and multiple jeopardy (i.e., being a recent immigrant, a visible minority, single, and poor).

(5) SELECTED RESEARCH ON GENERATIONAL LINKAGES AND ISSUES ACROSS THE LIFE COURSE

A) Generational Relations at the Family Level

Building upon the life course/ecological framework, four major research domains that influence the nature and quality of intergenerational relationships and exchanges of support over the life course will be highlighted. These include: (1) cultural and ethnic group characteristics; (2) socio-economic and socio-demographic characteristics, including age and life course stage; (3) proximity and distance; and (4) health and well-being, which encompass care-giving and dependency issues. These “micro” dyadic factors create diversity and the structural potential for creating a number of generational challenges and opportunities.

(5.1) Cultural and ethnic group characteristics: Generational relations are influenced by norms, values, expectations and traditions, immigration history and language. Research emphasizes the impact of filial obligation and expectations of family members about “appropriate” family roles, responsibilities and living arrangements. Many traditional ethnic groups

(e.g., Asians) are noted to have cultural histories and traditions that emphasize family-centeredness, the collectivity, extended family, and respect for the elderly. It is also found that that these norms and traditions can produce a high level of “social capital,” or relational support that can buffer many family challenges. Conversely, “Canadian” or Western cultures are often associated with individualistic goals and pursuits. However, it is important to also consider the quality of the generational relationship and the need for support at particular transitional points in life, and not assume that these are ubiquitous (Mitchell, in press; 2003a; 2000; Mitchell, Wister & Gee, 2004). Moreover, it should not be assumed that all “ethnics” take care of “their own,” since this can lead to misguided assumptions.

Furthermore, research shows that foreign-born families may be susceptible to higher levels of generational conflict, especially when an older generation holds traditional norms and values and the younger generation has been exposed to “Canadian” culture (Statistics Canada, 2003b). Also, many studies find that older individuals (especially immigrant parents) tend to assimilate or acculturate less quickly than children or young people, which can create intergenerational conflict (Anisef and Kilbride, 2003).¹ Common reasons for disagreement between parents and children are clashing norms and values (e.g., religious differences), schoolwork, and peer group and dating issues (Tyyska, 2003).

(5.2) Socio-economic and socio-demographic characteristics: Poverty and education level can affect the flow of intergenerational transfers (e.g., pooling or exchanges of financial capital or resources). The Campaign 2000’s Report Card on Poverty documents that visible minority children are twice as likely to live in poverty (33.6% versus 18.4%) than all children in Canada. With respect to recent immigrants, a striking 49% of children live in poverty, and the low-income rate is 2.5 times the native born rate in 2000 (Policy Research Initiative, 2004). Generally, Boyd (2000) finds that “living in households or families with poor economic resources is particularly likely for immigrant offspring whose ethnic origins are Arabic, Black/Caribbean, Latin/Central/South American, Spanish (born in the Americas), Vietnamese and West Asian.” Recent visible minority immigrants are also more likely to experience a trajectory of long-term disadvantage over the life course (i.e., leave home and school early, experience disadvantage in the labor force, etc.) compared to those born in Canada (Hatfield, 2004; Statistics Canada, 2003c).

Furthermore, many elderly visible minority persons experience poverty and do not qualify for pensions. Some must rely on other family members for food and shelter, which can potentially create strain, overcrowding and dependency issues (Gee and Mitchell, 2003). Other may lack both financial and family support, in particular, women as seniors, African men, and single mothers from Africa, Latin America and the Caribbean (Thomas, 2001). Generational relations are also affected by the interaction of culture, gender and family structure. Regardless of ethnic background, women tend to be responsible for child care, elder care and the maintenance of cultural values and traditions (Desai and Subramanian, 2003). Also, while most visible minority families live in nuclear families, women from Latin America and the Caribbean are more likely to be single parents, creating a different set of issues (Thomas, 2001).

(5.3) Proximity and Distance: Generally, exchanges of support (instrumental and affective) are more intensive when family members share the same residence, and are affected by a number of factors such as: cultural and socio-economic background, immigration status and age at immigration, gender, and changes over the life course. For instance, recent immigrants from Asian societies (e.g., Indo and Chinese) are more likely to reside in three-generational households than non-Asians, partly because of a cultural tradition of extended family living (Gee and Mitchell, 2003; Mitchell, 2004b). On the one hand, family members can pool resources, and provide for child care and/or elder care. On the other hand, visible minorities are more likely to live in crowded and sometimes unhealthy housing conditions than non-visible minority families.

¹ Assimilation is defined as a process by which a group or individual becomes more like the dominant group in such cultural elements as language, dress, values and identity. Acculturation is a process in which individuals from one cultural group, through contact with another cultural group, learn and internalize the cultural traits of the other group (McPherson, 2004).

(5.4) Health, Well-Being and Dependency Issues: A federal-provincial study, *Toward a Healthy Future*, reports that “Canadians are among the healthiest people in the world; however this good health is not enjoyed equally by everyone” (Anisef and Kilbride, 2003). Indeed, some visible minority groups are found to have poorer health than others, and this may be partly due to socio-economic status since it is also a major determinant of health and well-being (Health Canada, 2003). Although research has established a “healthy immigrant effect,” whereby recent immigrants are positively selected for good health, this tends to decline over time and may not be applicable to all age groups. Gee et al. (2004), for example, note that older aged visible minority immigrants tend to be in much poorer health than midlife individuals. This can create dependency on family members for caregiving. In fact, some research indicates that it is in these households that the highest level of caregiver strain exists, which can lead to elder abuse (e.g. financial and physical) and other domestic problems (Pruchno et al, 1997).

Also, visible minority groups can experience social exclusion², due to the psychosocial stress of discrimination, which can contribute to health problems (Galabuzi, 2002). In addition, many refugees flee home countries because of a history of trauma and abuse, which can impact their health and well-being (e.g., Mohamed, 1999). Recent studies also show that newcomer immigrant youth are twice as likely to suffer from depression as other individuals aged 35 and older (Beiser, 1999). There may also be other psychological issues related to violence and abuse, suicide, and child disciplinary practices inconsistent with Canadian norms (Wadhvani, 1999; Scott, 2003). Overall, these characteristics interact with a number of conditions and circumstances in the larger environment. It is at this level where unique generational demands, constraints and opportunities can also emerge.

B) GENERATIONAL RELATIONS AT THE ENVIRONMENTAL LEVEL

(5.5) Employment settings: Visible minorities report that the most commonly stated situation in which they perceive discrimination is in the workplace or when applying for a job or a promotion (Statistics Canada, 2003d). Overall, many face systemic social barriers in securing employment or in gaining recognition of their professional qualifications (Basran and Zong, 1998; Isaijw, 1999). Visible minority youth, for example, often experience high unemployment because they lack Canadian work experience, language skills, or a social network to facilitate finding work (Anisef and Kilbride, 2003). Visible minority women (e.g., Blacks, Filipinos) also commonly report lower rates of employment than men and “ghettoization” in the labour market.

(5.6) Daycare/schools: Access to affordable, good quality daycare may be a particularly salient issue for certain visible minority groups (e.g., Blacks, Arabs and Filipinos), due to higher fertility rates, family structure, language issues, and cost (e.g., Milan and Tran, 2004). For example, according to the 2001 Census, a much higher proportion of Black children lived with only one parent than other children (46% versus 18%). Research also indicates that many visible minority youth encounter significant challenges coping with the school system (Kunz, 2003; Lam, 1994). Factors underlying these problems include pressure from their parents to succeed in school (Momirov and Kilbride, 2003), school policies, teacher’s discriminatory attitudes, and schools’ organizational structure in which achievement or success among minority youth is not encouraged.

(5.7) Social networks: Social networks such as extended family, friends, neighbours and communities can provide visible minority families with a number of social capital resources (e.g., cultural, information and support), but may also be problematic. Indeed, some peer groups for youth are destructive. For example, there has been considerable media attention in Vancouver that many Indo-Canadian youths have been lured into gang and drug violence. As a result, a coalition of anti-violence groups and Sikh temples presented a number of ideas to the federal government and enlisted their assistance to address the problem (Bolan, 2004).

² Social exclusion refers to the structures and processes of inequality among groups in society. It refers to the inability of certain groups or individuals to participate fully in Canadian life due to structural inequalities in access to social, economic, political and cultural resources. These inequalities can arise out of conditions related to race, class, gender, disability, sexual orientation, immigrant status, and religion (Health Canada, 2003).

(5.8) Community/neighborhood characteristics: Ethnic neighborhoods can enable the retention of ethnic identity and the maintenance of religious, educational and welfare institutions that are critical for the social interaction of the group. Conversely, they can impede the acquisition of language skills, and educational and work experience. Moreover, neighborhoods with a large concentration of visible minorities tend to have poor economic status because of high unemployment and low-income rates. Thus, the tendency for recent immigrants to cluster in minority communities can affect their economic outcomes and the overall economic conditions of the neighborhoods where they live (Hou and Picot, 2004).

(5.9) Access to services: Visible minority families are often not aware of services or access them easily. A recent study on Blacks found that many were unaware of services, and even if they found the right services, many did not use them because of cultural differences, norms of family privacy, and language barriers. Instead, they were more likely to rely on friends and family for support (Scott, 2003). Finding proper care for ethnic minority elders is especially challenging because of numerous obstacles to finding and providing culturally appropriate care (Albanese, 2005).

(6) FEDERAL POLICY CONSIDERATIONS

Based on the earlier discussions, there are a number of considerations for federal policy in the following areas: (1) immigration policies, settlement, housing and residential concentration; (2) childcare and education; (3) employment and income; and (4) access to services, including health and social services; and (5) the need for intersectoral collaboration and knowledge transfer among these areas. It is understood that many of these issues are dealt with by various levels of government (e.g., federal, provincial and municipal). However, federal policy can play a pivotal role in both provincial and municipal policies and programs by the formulation of federal directives, taxation and government transfers (e.g. grants).

These policy issues are discussed within the context of the life course/ecological conceptual framework, which emphasizes the importance of examining how resource availability and access occurring at pivotal points in life can affect educational, work, health, and family outcomes. This approach also underscores the need to break cumulative disadvantage for some visible minorities as well as the facilitation and support of cumulative advantage over time. It also recognizes the significance of considering processes of migration, adjustment, adaptation and integration, which occur over time and differentially depending on life course stage (Frank & Kunz, 2004). Another relevant issue pertains to the distinction between foreign-born and Canadian-born visible minorities, given that the generational challenges and opportunities faced by these groups and the processes they are likely to undergo may be different. For this reason, we will delineate which group is being targeted.

(6.1) Immigration Policies, Settlement, Housing and Residential Concentration

Immigration policy plays a critical role in shaping the characteristics of visible minority immigrants and can directly or indirectly determine patterns of support and living arrangements. Many immigrants leave behind family members and this can fragment families. This is particularly disruptive for individuals in their family-building years. Policies sometimes separate spouses and parents from their children while immigration applications are being processed, which can strain parent-child relationships. For example, Caribbean single mothers and those from low-income groups tend to leave their small children in the care of relatives when they emigrate. Sometimes it takes several years before the parents have the money to sponsor their children's entry into Canada (Calliste, 2003). Furthermore, dependency can be unintentionally created by policies that admit women to Canada as a spouse or a dependent rather than as a principal applicant (Momirov and Kilbride, 2005). Several policy recommendations and issues are as follows:

- Processing time of immigration applications need to be reduced to eliminate the potential negative consequences for family unification and development, especially for those in their family-building years
- Policies that promote adjustment, adaptation and integration into Canadian society by visible minorities should be supported
- Housing and work opportunities should be provided that deter visible minority populations from congregating in poor neighborhoods within the core of metropolitan areas and ethnic enclaves

(6.2) Childcare and Education Policies

The starting place to break the accumulation and reproduction of economic and social disadvantage observed among some visible minorities is early in the life course, especially for recent immigrants. Early childhood education and support of lifelong learning are probably the best investments into breaking the cycle of persistent low income and marginalization. This is most pronounced for visible minorities. There is also a need to support intergenerational programs that include multiple generations of the same family (i.e., child and parent) that can provide resources and information which facilitate successful life trajectories. A number of key policy considerations include:

- Targeted and culturally relevant pre-school and daycare programs based upon need (i.e., fertility patterns, family structure) and accessibility (e.g., due to low income of many visible minority groups)
- Expansion of ESL programs especially for recent immigrants
- Expansion of curriculum training modules for teachers to support understanding of ethnocultural relations and issues (e.g., “Common Ground Days”)
- Culturally relevant and diverse curriculum (e.g., teaching of world religions in humanities classes)
- Prevention/Intervention programs for youths at risk (e.g., gang behaviour, delinquency, dropping out of school)
- Access to post-secondary education and training needs to be increased

(6.3) Employment and Income-based Policies

Some visible minority families are at greater risk of unemployment, underemployment and low income. Issues of discrimination, education and work experience from another country (among foreign-born), and marginalization play a role in these patterns. From a life course ecological perspective, investment into employment programs that can result in long-term labour force attachment, and the provision of income support for families in need, will translate into numerous economic and social benefits through generational transfers. Several recommendations arise from this discourse.

- Ethnocultural discrimination should be reduced through public education and employer/worker education programs
- The recognition of foreign credentials needs to be made more judicially
- Job training programs aimed at long-term labour force attachment
- Recognition of younger age structure of visible minority population in relation to labour force participation

(6.4) Policies Dealing with Access to Services

Both Canadian and foreign-born visible minorities are disadvantaged with respect to accessing health and social services. Some of these problems are directly linked to cultural norms, values and beliefs of particular minority groups, while others stem from inequities in the macro system. Often, generational issues transverse these problems, for instance, many services are designed to meet the needs of individuals rather than the needs of families. This leads us to consider several issues:

- Health policies need to be tailored to meet the specific needs of ethnic groups, gender and life course stage (e.g., older aged recent immigrants may have an increased need for services, due to poor health status; Gee et al., 2004)
- Programs and services need to recognize that health is a multi-faceted and culturally specific concept (e.g., Western versus Eastern health practices)
- There is a need to make social services and community supports more culturally relevant (e.g., refugees may have specific issues related to mental health issues, trauma and abuse; programs and services to recognize norms of family privacy and to promote intergenerational solidarity when cultures “clash”)
- Support for cultural organizations (NGOs) to support social inclusion (e.g., S.U.C.C.E.S.S., a well-known Chinese organization located in Vancouver allows visible minority families to balance their distinct ethnic heritage and family traditions while integrating into society)

(6.5) Need for Intersectoral Collaboration and Further Knowledge Transfer

It is well-known that a limitation to effective and efficient policy is the absence of integration across ministries and portfolios. Greater intersectoral collaboration would reduce unanticipated negative consequences of policies on visible minority families by increasing awareness of unique problems and issues, as well as promote more effective policies, services and programs.

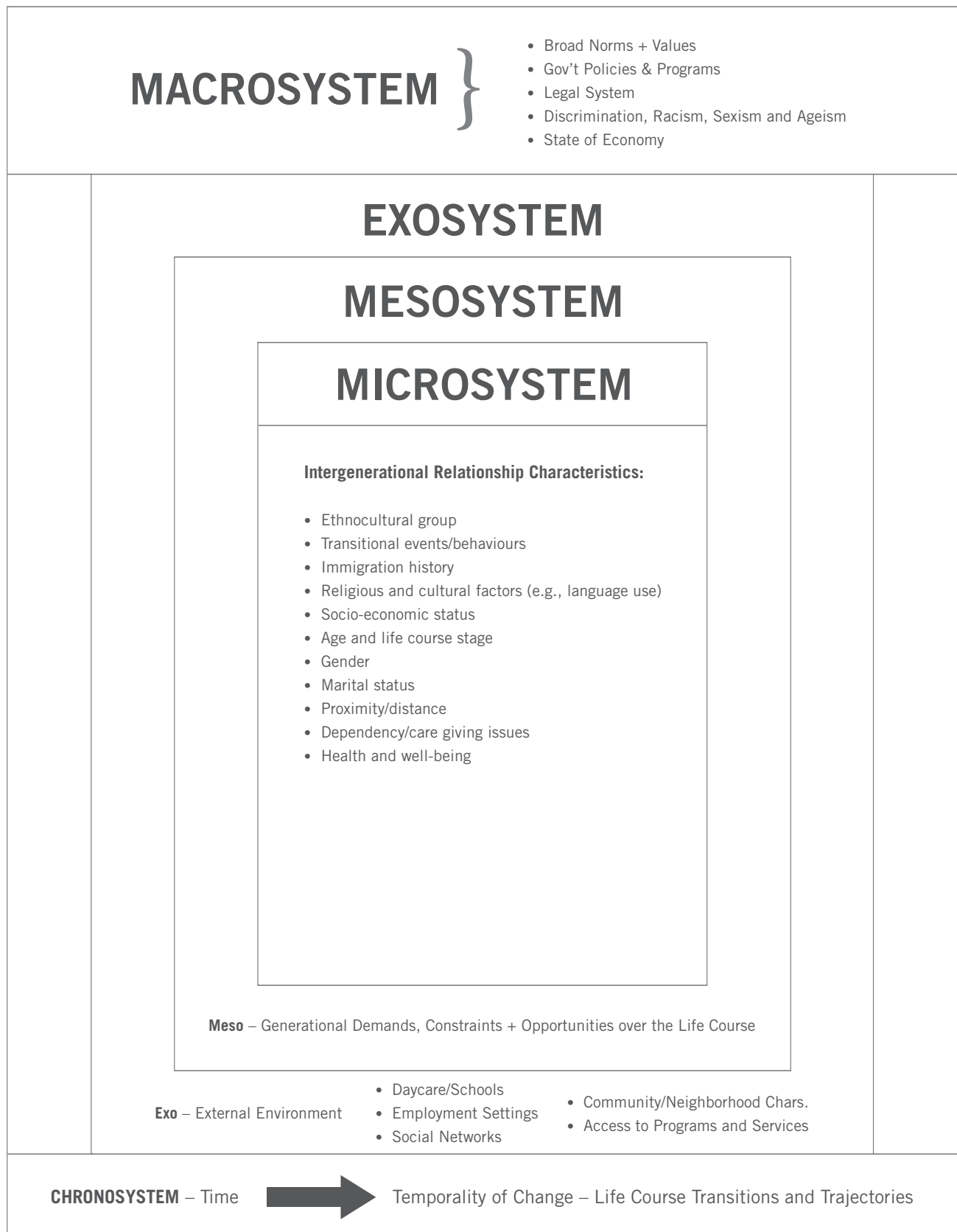
- Increased need for dialogue, cooperation, and collaboration among various government ministries and sectors involved in the development and implementation of policies targeting visible minorities
- Support of think tanks comprised of experts, policy makers, community stakeholders and members of visible minority families in an effort to identify unintended consequences of policies on families and generational relationships.
- Need for additional research on Canada's growing visible minority population within the context of changing family structures, economic conditions and population aging (e.g., intergenerational transfers by specific visible minority over the life course and during the acculturation process) and the sharing of this knowledge with policy makers and advisors, professionals, and the community

SUMMARY/CONCLUSIONS

In summary, research underscores the need to recognize diversity and the structural potential for both conflict and support in visible minority generational relations. It is insufficient to build policy on narrowly conceptualized intergenerational transfers that artificially circumscribe the contexts in which visible minority families live (McDaniel, 2002) and the generational challenges and opportunities faced. We therefore require policies that balance the ability of visible minorities to make positive intergenerational linkages and retain aspects of their cultural heritage, while also allowing for self-sufficiency and social inclusion in Canadian society. Policies need to be inclusive, equitable, proactive, and coordinated (e.g., no gaps between formal and informal support systems). They also should not assume that visible minority families have built in caregiving resources.

Two priority areas identified in this paper include: 1) expansion of policies, programs, and services targeting visible minority families, especially when they lack economic and social capital resources at critical points in the life course; and 2) the development of policies, programs and services that retard or reverse cumulative disadvantage among poor and marginalized visible minorities and facilitate cumulative advantage, with an emphasis on education and training. Visible minority families often face the same challenges that non visible-minority families face but with the added dimension of dealing with discrimination and trying to integrate successfully into Canadian society and culture. And while the family represents one of the greatest sources of support or "social capital," it can also be a source of conflict and tension. Some individuals may even lack basic family support, particularly when it is needed the most. Therefore, we need to make the proper investments through supportive policy initiatives in order to ensure successful life course outcomes. This will enhance the health and well-being of the growing population of visible minorities and ensure a productive and prosperous future for all Canadians, regardless of skin colour.

Figure 1:
A Life Course/Ecological Framework Applied to Visible Minority Generational Relations, Challenges, and Opportunities



BIBLIOGRAPHY

- Albanese, P. (2005). "Ethnic Families," pp. 121-142 in Families, Changing Trends in Canada (M. Baker, ed.). Toronto: McGraw Hill Ryerson.
- Anisef, P. and Kilbride, K.M. (Eds). (2003). Managing Two Worlds: The Experiences and Concerns of Immigrant Youth in Ontario. Toronto: Canadian Scholar's Press.
- Basran, G.S. and Zong, L. (1998). Devaluation of Foreign Credentials as Perceived by Visible Minority Professional Immigrants. Canadian Ethnic Studies, 30(3), 339-352.
- Beiser, M. (1999). Strangers at the Gate: The "Boat People's" First Ten Years in Canada. Toronto: University of Toronto Press.
- Bronfenbrenner, U. (1979). The Ecology of Human Development: Experiments by Nature and Design. Cambridge, MA: Harvard University Press.
- Bronfenbrenner, U. (1986). "Ecology of the Family as a Context for Human Development: Research Perspectives." Developmental Psychology, 22(6), 723-742.
- Bolan, K. (2004). "Stop the Violence, Leaders Plead." The Vancouver Sun, Tuesday, December 21.
- Boyd, M. (2000). "Ethnicity and Immigrant Offspring," pp. 137-154 in Perspectives on Ethnicity in Canada (M.A. Kalbach and W.E. Kalbach, eds.). Toronto: Harcourt Publishing.
- Bulboz, M. and Sontag, M.S. (1993). "Human Ecology Theory," pp. 419-448 in Sourcebook of Family Theories and Methods: A Contextual Approach (P.G. Boss et al., eds.). New York: Plenum Press.
- Calliste, A. (2003). "Black Families in Canada: Exploring the Interconnections of Race, Class and Gender," pp. 199-220, in Voices: Essays on Canadian Families, 2nd edition (M. Lynn, ed.) Toronto: Nelson-Thompson Publishing
- Desai, S. and Subramanian, S. (2003). "Color, Culture and Dual Consciousness: Issues Identified by South Asian Immigrant Youth in the Greater Toronto Area," pp. 118-161 in Managing Two Worlds: Immigrant Youth in Ontario (P. Anisef and K.M. Kilbride, eds). Toronto: Canadian Scholar's Press.
- Elder, G.H. (1978). "Approaches to Social Change and the Family," pp. 1-38 in Turning Points: Historical and Sociological Essays on the Family (J. Demos and S.S. Boocock, eds). Chicago: University of Chicago Press.
- Frank, J. and Kunz, J.L. (2004). "New Approaches for Addressing Poverty and Exclusion." Retrieved February 11, 2005 from www.policyresearch.gc.ca, Policy Research Initiative.
- Galabuzi, G. (2002). "Social Exclusion." A paper and presentation given at the Social Determinants of Health Across the Life-Span Conference, Toronto, November 2002.
- Gee, E.M., Kobayashi, K.M. and Prus, S.G. (2004). "Examining the Healthy Immigrant Effect in Mid- to Later Life: Findings from the Canadian Community Health Survey." Canadian Journal on Aging, 23, S61-S69.
- Gee, E.M. and Mitchell, B.A. (2003). "One Roof: Exploring Multi-Generational Households in Canada," pp. 291-311 in Voices: Essays on Canadian Families, 2nd edition (M. Lynn, ed.) Toronto: Nelson-Thompson Publishing
- Hatfield, M. (2004). "Vulnerability to Persistent Low Income." Horizons: Policy Research Initiative, Vol. 7(2), 19-33.
- Health Canada. (2003). "Social Inclusion as a Determinant of Health." Public Health Agency of Canada: Population Health Approaches. Retrieved January 30, 2005 from http://www.phac-aspc.gc.ca/ph-sp/phdd/overview/implications/03_incl.
- Hou, F. and Picot, G. (2004). "Visible Minority Neighborhoods in Toronto, Montreal and Vancouver." Canadian Social Trends. Spring, 72, 8-13.
- Isajiw, W. (1999). Understanding Diversity: Ethnicity and Race in the Canadian Context. Toronto: Thompson Educational Publishing.

- Lam, L. (1994). "Immigrant Students," pp. 122-130 in Learning and Sociological Profiles of Canadian High School Students. Lewiston, NY: Edwin Mellen Press.
- McDaniel, S.A. (2002). "Intergenerational Interlinkages: Public, Family, and Work," pp. 22-71 in Aging and Demographic Change in Canadian Context," (D. Cheal, ed.). Toronto: University of Toronto Press.
- McPherson, B. (2004). Aging as a Social Process: Canadian Perspectives. Don Mills, Ont.: Oxford University Press.
- Milan, A. and Tran, K. (2004). "Blacks in Canada: A Long History." Canadian Social Trends, Spring, 72, 2-7.
- Mitchell, B.A. (in press). "Social Capital and Intergenerational Coresidence: How Ethnic Communities and Families Shape Transitions to Adulthood." To be published in Diversity, Social Capital and the Welfare State (R. Johnston and F. Kay, eds.). Vancouver: University of British Columbia Press.
- Mitchell, B.A. (2004c). "All in the Family: Canadian Trends in Multigenerational Households." Seniors' Housing Update, Vol. 13(2), pp.1-3, Gerontology Research Centre, Simon Fraser University.
- Mitchell, B.A. (2003a). "Would I Share a Home with an Elderly Parent? Exploring Ethnocultural Diversity and Intergenerational Support Relations during Young Adulthood." Canadian Journal on Aging, 22(1), 69-82.
- Mitchell, B.A. (2003b). "Life Course Theory," pp. 1051-1055 in The International Encyclopedia of Marriage and Family Relationships, 2nd ed., (J.J. Ponzetti, ed.). New York: Macmillan Reference, USA.
- Mitchell, B.A. (2000). "The Refilled Nest: Debunking the Myth of Families-in-Crisis," pp. 80-99 in The Overselling of Population Aging: Apocalyptic Demography, Intergenerational Challenges, and Social Policy (E.M. Gee & G. Gutman, eds.). Toronto: Oxford University Press.
- Mitchell, B.A., Wister, A.V. and Gee, E.M. (2004). "The Ethnic and Family Nexus of Homeleaving and Home Returning Among Canadian Young Adults." The Canadian Journal of Sociology, 29(4), 543-575.
- Mohamed, H.S. (1999). "Resistance Strategies: Somali Women's Struggles to Reconstruct their Lives in Canada." Canadian Woman Studies, 19, 52-57.
- Momirov, J. and Kilbride, K.M. (2005). "Family Lives of Native Peoples, Immigrants, and Visible Minorities," pp. 87-111 in Canadian Families: Diversity, Conflict and Change (N. Mandell and A. Duffy, eds.). Toronto: Thomson Nelson.
- Pruchno, R.A., Burant, C.J., and Peters, N.D. (1997). "Coping strategies of people living in multigenerational households: Effects on well-being." Psychology and Aging, 12, 115-124.
- Riley, M.W. and Riley, J.W. (1996). Generational relations: A future perspective. In T.K. Hareven (ed.), Aging and generational relations: Life course and cross-cultural perspectives (pp. 283-291). New York: Aldine de Gruyter.
- Salaff, J. (1995). Working Daughters of Hong Kong. New York: Columbia University Press.
- Schiemberg, L.B. and Gans, D. (1999). "An Ecological Framework for Contextual Risk Factors in Elder Abuse by Adult Children." Journal of Elder Abuse and Neglect, 11, 79-103.
- Scott, J.L. (2003). "English Language and Communication: Issues for African and Caribbean Immigrant Youth in Toronto," pp. 96-117 in Managing Two Worlds: Immigrant Youth in Ontario (P. Anisef and K.M. Kilbride, eds). Toronto: Canadian Scholar's Press.
- Statistics Canada. (2005). Population Projections of Visible Minority Groups, Canada, Provinces and Regions, 2001-2017, Catalogue no. 91-541-XIE, Ottawa.
- Statistics Canada. (2003a). Canada's Ethnocultural Portrait: The Changing Mosaic. Ottawa: Minister of Industry.
- Statistics Canada. (2003b). The Daily, Ethnic Diversity Survey, Monday, September 29, 2003. Retrieved January 25, 2005 from <http://www.statcan.ca/Daily/English/030929/d030929a.htm>.
- Statistics Canada. (2003c). Longitudinal Survey of Immigrants in Canada: Process, Progress and Prospects. Ottawa: Minister of Industry.

- Statistics Canada, (2003d). Ethnic Diversity Survey: Portrait of a Multicultural Society. Catalogue no. 89-593-XIE.
- Thomas, D. (2001). "Evolving Family Living Arrangements of Canada's Immigrants." Canadian Social Trends, Summer, 61, 16-22.
- Tyyska, V. (2003). "Solidarity and Conflict: Teen-Parent Relationships in Iranian Immigrant Families in Toronto," pp. 312-331 in Voices: Essays on Canadian Families, 2nd edition (M. Lynn, ed.). Toronto: Nelson-Thompson Publishing
- Wadhwanit, Z. (1999). To be or Not to Be: Suicidal Ideation in South Asian Youth. Master's Thesis. Montreal: McGill University.
- Westney, O.E. (1993). "Human Ecology Theory: Implications for Education, Research and Practice," pp. 449-451 in Sourcebook of Family Theories and Methods: A Contextual Approach (P.G. Boss et al., eds.). New York: Plenum Press.