



## EXECUTIVE SUMMARY

**Resettling health and wellness**

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THE VALUE OF INTEGRATED NEWCOMER CARE

## Acknowledgements

WoodGreen would like to thank participants who shared their time and insights for our interviews. We are also grateful to the newcomer clients we work with who have shared their experiences with us and who inspired this report and the work we do each day. Finally, we greatly appreciate the input and advice of WoodGreen's advisory panel members, listed below, who helped to guide this report. Any errors remain those of the authors.

## About WoodGreen Community Services

A United Way Anchor Agency, WoodGreen combines significant scale and a proven track record with an entrepreneurial mindset, continuously seeking and developing innovative solutions to critical social needs. With a rich history spanning more than 80 years, WoodGreen is one of the largest social service agencies in Toronto, serving 37,000 people each year from 36 locations. Together we help people find safe, affordable housing, seniors live independently, internationally-trained professionals enter the job market, parents access childcare, children and youth access after-school programs, newcomers settle in to Canadian life, homeless and marginalized people get off the streets, youth find meaningful employment and training and provide a wide range of mental health supports.

## Advisory panel members

**Dr. Alnoor Aziz**, Crescent Town Health Centre

**Dr. Catherine Yu**, East Toronto Family Practice Network and Health Access Thorncliffe Park

**Dr. Deborah Kopansky-Giles**, St. Michael's Hospital and Canadian Memorial Chiropractic College

**Emily Mooney**, Wellesley Institute

**Jesse Rosenberg**, Wellesley Institute

**Mohan Doss**, WoodGreen Community Services

**Nadjib Alamyar**, WoodGreen Community Services

**Rebecca Cheff**, Wellesley Institute

**Wolf Klassen**, Michael Garron Hospital



Crescent Town Health Centre





WoodGreen Community Services has been on the frontlines of supporting newcomers to Canada as they settle and build their lives. We are happy that our work remains vital: Canada has set a target of welcoming over 1.2 million people in the next three years.<sup>1</sup>

At the same time, the COVID-19 pandemic has had unequal impacts across Canada, making newcomers less secure.<sup>2</sup> Newcomers already faced intersecting factors that made them less likely to be financially stable, socially mobile, or physically and mentally well. The pandemic has compounded these conditions and hurt newcomers' health and well-being. Integrated care—connecting people with a seamless suite of coordinated, wrap-around services—can make a difference,

especially when it combines health care with settlement and other social services. We've seen the difference this can make for newcomers during the COVID-19 pandemic through WoodGreen's Interprofessional Care (IPC) program, which brings settlement case counsellors and primary health care professionals together on the same team. But there are barriers to scaling up solutions like this.

**By publishing this report, WoodGreen hopes to create a resource, encourage open dialogue and discussion, and urge a call to action.** We know from our own experiences, and that of others, that integrated care can help support health and wellness for newcomers. We want to help amplify the benefits of this model by making sure integrated care programs for newcomers have the supports they need to scale up successfully and be adopted more widely.

## Newcomers are falling through the cracks

On average, newcomers come to Canada in better health than the general population; yet their health and wellness tend to rapidly decline during the settlement process.<sup>3</sup> More troubling: this trend does not reverse or correct itself even after people have been in Canada for years. Newcomers to Canada stay in poorer health over their lifetimes.

In our work, we've seen that this is often caused by factors in people's lives beyond medical issues. These are the **social determinants of health**: the conditions in which people are born, live, work and/or age and the broader economic, social, and political forces that shape these conditions of daily life.<sup>4</sup> Intersecting factors like poverty and structural racism are at play. Many of our newcomer clients don't have secure housing, don't have access to health care and/or don't have enough to eat. While there are services aimed at helping with some of these issues, it's extremely challenging to navigate all of these simultaneously. Many newcomers are left out and left behind.

## Health and settlement services are fragmented

Newcomer health and wellness cannot be separated from the social determinants of health.<sup>5</sup> Unfortunately, Canada's administratively siloed system treats settlement services as distinct from health care services. Health care is funded and provided by provincial governments. Settlement services are mainly funded by the federal government and provided by local organizations, with funding tied to a person's immigration status rather than their needs and life situation. The result is poor coordination, misalignment, and dangerous gaps in services.

## Integrated care closes gaps and puts people first

Integrated care is an approach to reducing fragmentation that puts the person at the centre and builds a complement of services around their needs.<sup>6</sup> Integrated care for newcomers means pairing settlement-style services with medical services. In this way people can receive continuous and coordinated support for their medical needs, as well as the social determinants of health—for example, receiving housing assistance or troubleshooting government benefits.



**Integrated care is an approach to reducing fragmentation that puts the person at the centre and builds a complement of services around their needs.**

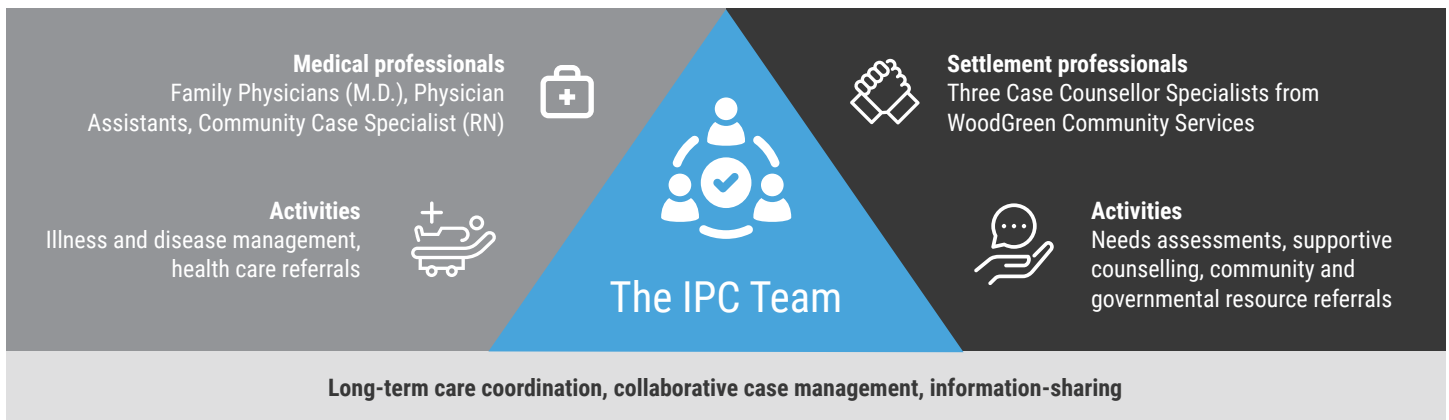
## Integrated care for newcomers: WoodGreen's Interprofessional Care (IPC) program

WoodGreen's IPC program embeds settlement case counsellor specialists in local primary care practices. While the health care professionals focus on clients' medical needs, the case counsellors simultaneously address their social determinants of health. This can mean providing needs assessments, short and long-term planning, supportive counselling, system navigation guidance, and coordinated referrals to other services and

government programs. More importantly, the case counsellors have access to interpretation services to support equitable access to care. They also use the same electronic medical record (EMR) as the health care professionals, which enables the whole team to share needed information, coordinate services, and make adjustments to care plans.

**At WoodGreen, we've seen real success with the program. Our newcomer clients report that the program has taken the stress out of accessing care and improved their health and well-being.**

**FIGURE 3  
STRUCTURE OF WOODGREEN'S IPC TEAM**



### Integrated care enhances newcomer care experiences

Integrated care's "any door approach" can improve the quality and experience of newcomer care by simplifying system navigation and improving service continuity.<sup>7</sup>



### Integrated care improves outcomes for newcomer populations

Integrated care can improve newcomer health and wellness through its whole-of-person approach to complex needs, including the social determinants of health.<sup>8</sup>



### Integrated care promotes well-being amongst care professionals

Integrated care can prevent burnout and improve well-being by building and coordinating relationships between health and settlement workers.<sup>9</sup>



### Integrated care makes health and settlement systems more efficient

Integrated care can improve the efficiency, cost-effectiveness, and sustainability of care systems by breaking down silos between health, settlement, and other services.<sup>10</sup>

## Recommendations to Support Integrated Care for Newcomers

Policymakers and stakeholders across the continuum of care need to be able to look past the jurisdictional, administrative, and organizational boundaries that keep health and settlement services separate. We know that breaking down silos in care is challenging. But recognizing settlement as a health and wellness issue is key to helping newcomers flourish in Canada.

**To realize the full potential of integrated newcomer care, policymakers need to partner with settlement providers, community agencies, health care organizations, and other stakeholders to co-create the conditions for successful integration. We need to take urgent, collective action to make integrated care work for newcomers, frontline workers, and organizations alike.**



### Make integrated care work for newcomers

Integrated care must centre newcomers. Newcomers need to be engaged and supported to ensure care is equitable and grounded in local perspectives.

**Policymakers should collaborate with stakeholders to:**

- **Include newcomers of all statuses** to bring care to those who need it most, including individuals with insecure legal status and people who have been in Canada for years.
- **Expand support services and locations** to enable access to care, including language services, child care, transportation assistance, and service sites in newcomer communities.
- **Support robust community engagement** in service planning and delivery, for example, by including newcomers in program governance or through community outreach positions.



### Make integrated care work for frontline workers

Integrated care requires professionals to work in new ways. To deliver coordinated care that's responsive to newcomers, frontline workers need the right resources, information, and training.

**Policymakers should collaborate with stakeholders to:**

- **Provide integration incentives and resources**, for example by increasing core funding for settlement service providers and adopting alternative payment models for physicians.
- **Develop information-sharing systems and guidance** to allow practitioners to effectively share information and coordinate care across different organizations, while respecting privacy.
- **Implement training and education programs** in interprofessional care, anti-oppression, and anti-racism to help professionals work together and deliver inclusive and empowering care.



### Make integrated care work for organizations

Integrated care requires health and settlement organizations to join services across silos. To deliver programs in partnership, organizations need the right incentives and supports in place.

**Policymakers should collaborate with stakeholders to:**

- **Align incentives across organizations**, such as through joint accountability frameworks or integrated funding that allocates resources equitably to settlement and health partners.
- **Provide change management support**, for instance through allocating funding for joint working groups, needs assessments, and ongoing monitoring and evaluation.
- **Require race-based and sociodemographic data collection** to ensure organizations have the information they need to track health equity outcomes and action program adjustments.

## About the summary

This note provides key takeaways from our report *Resettling health and wellness: The value of integrated newcomer care*. The full report can be accessed at [www.woodgreen.org/IntegratedCareReport](http://www.woodgreen.org/IntegratedCareReport).

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## Key Sources

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