

CELEBRATING  
**20**  
YEARS



1989 Access Alliance 2009  
Multicultural Health and Community Services

**ACCESS ALLIANCE**  
Report to the Community  
2008 to 2009

## Message from the Board Chair & Executive Director

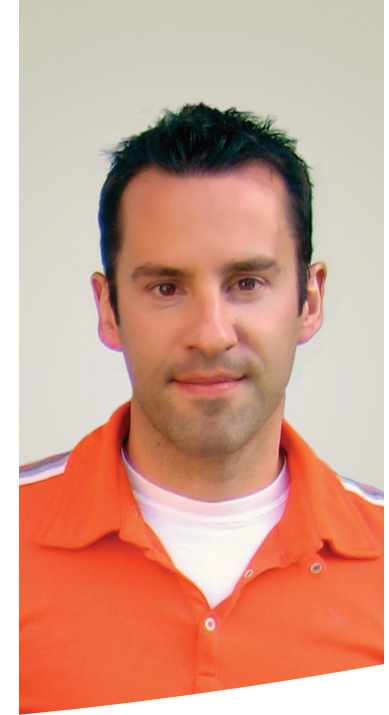
# Access Alliance celebrates 20 exciting years of achievement



**DID THE FOUNDING COMMUNITIES** of Access Alliance ever imagine what the organization would look like in 20 years? How did they imagine future challenges and successes would shape the growth of the organization? Aristotle said, *The whole is greater than the sum of its parts.* Together, there are many individuals who have contributed to our success as an organization and we want to thank each and every one of them for their efforts in teaching, strengthening, and renewing Access Alliance throughout the years.

As our theme for this year states, we're *looking back, looking forward.* There have been many changes in health care and the broader public sector in the last twenty years in regards to access issues. Systemic barriers, determinants of health, immigrants and refugees have now become mainstream concepts and phrases that all health care organizations in Toronto have an understanding of and strategies to address. Access Alliance can be very proud of its role in making these changes happen. Even with all the changes in society, in the composition of immigrant and refugee communities and the challenges faced, we have remained steadfast on some key issues:

- We have a solid and strong commitment to the determinants of health. We employ a broad range of strategies and provide services using an integrated and interdisciplinary approach, while remaining responsive to changing community needs.
- We focus on the most disadvantaged immigrants and refugees. There are many needs and



issues and we want to make sure we work with those communities that face the most severe barriers.

- We are committed to evidence-based practice. We want to have a good solid basis for our priorities, be able to identify expected outcomes and evaluate them in such a way that it contributes to ongoing learning and improvement.
- We acknowledge that strategic partnerships are critical for our success. We need to be collaborative and not territorial, be committed to building capacity, to putting our resources out in the community, and to having shared leadership in the sector on numerous issues.

Many challenges still exist for newcomers to Canada. Our 20th year anniversary can be considered bittersweet in that yes, we have grown, achieved, and even shaped sectoral and societal views but our presence is still necessary as there

is more work to do. In Toronto, we have the racialization of poverty, we still have limited commitment to systemic access strategies as opposed to ad hoc fixes, and we continue to have fragmented and partisan approaches to moving forward on key issues. Access Alliance is committed to continuing its work with our communities and partners to address these issues and to learn from the past as we continually realign services and programs both within our organization and externally to ensure that diverse individuals, families, and communities can achieve *health with dignity.*

Congratulations to all the staff, volunteers, students, members, and partners, both past and present, on 20 Years of Health, 20 Years of Dignity! Join us for more.

**Left:** Axelle Janczur, Executive Director,  
**Right:** Nelson Cabral, Board Chair

## Community Networks and Partners

Access Alliance would not be able to meet the needs of the new and emerging communities it works with without our partners located throughout the city:

- Across Boundaries
- Agincourt Community Services Association
- Association of Ontario Health Centres (AOHC)
- Barbra Schlifer Commemorative Clinic
- Better Beginnings (now CAP-C)
- Black Creek CHC
- Cahoots Theatre Projects
- Canadian Association of Family Resource Programs
- Canadian Association of Family Resource Programs – FRP – Save the Children Canada
- CASSA
- Centre for Research on Inner City Health (St. Michael's Hospital/St. Joe's TB Clinic)
- Centre of Excellence for Research on Immigration and Settlement – CERIS
- COSTI Immigrant Services
- CultureLink
- Davenport-Perth Neighbourhood and Community Health Centre
- Delta Family Resources Centre
- Doorsteps Neighbourhood Services
- East Scarborough Storefront
- East York East Toronto Family Resources
- The 519 Church Street Community Centre
- Flemingdon Neighbourhood Services
- Four Villages Community Health Centre
- LAMP Community Centre
- Lawrence Heights Community Health Centre
- Lighthouse
- Oakridge Community Recreational Centre
- OCASI
- Parkdale CHC
- Queen West Community Health Centre
- Queens University – Faculty of Health Sciences (Nursing)
- Regent Park Community Health Centre
- Rexdale Women's Centre
- Ryerson University – Department of Nursing
- Ryerson University – School of Social Work
- Ryerson University – Continuing Education
- Scarborough Addiction Services Partnership – SASP
- Sistering
- Skills for Change
- St. Christopher House
- St. Joseph's Health Centre
- St. Joseph's Women's Health Centre
- St. Stephen's Community House
- Stonegate Community Health Centre
- STOP Community Food Centre
- Street Health
- Syme Woolner Neighbourhood & Family Centre
- Thorncliffe Neighbourhood Office
- Toronto Community Housing Corporation
- Toronto Public Health
- Toronto Western Hospital
- University of Toronto – Department of Medicine. St. Joseph's Hospital
- University of Toronto – Faculty of Social Work
- University of Toronto – School of Social Work
- Warden Wood Community Centre
- West Hill Community Health Care
- Working Women Community Centre
- York University – School of Social Work

## Our Vision

We envision a future in which diverse individuals, families and communities can achieve **Health With Dignity**.

## Our Mission

Access Alliance works to promote health and well-being and improve access to services for immigrants and refugees in Toronto by addressing medical, social, economic and environmental issues.

## Our Values

- Every individual has the right to be treated with respect and dignity
- Integrity, honesty and ethical behaviour are the cornerstones of caring relationships
- All people should have access to equitable opportunities and access to the determinants of health
- Diversity and inclusion enrich our families, communities and agencies
- Empowerment thrives in environments free from oppression and discrimination

## Board List 2008

Aamna Ashraf, Board Member

Nelson Cabral, **CHAIR**

Keisa Campbell, **TREASURER**

Elba De Leon, Board Member

Arminda Gonzalez-Dumpierrez, Board Member

Deepika Grover, Board Member

Michael Isaacs, Board Member

Erika Khandor, **VICE-CHAIR**

Anita Morris, Board Member

Moez Rajwani, Board Member

Shuah Roskies, **SECRETARY**

**Thank You and Goodbye to:**  
(resigned within the year)

Hanna Louie, Board Member

Eleanor Berglund, **TREASURER**

## Then and Now: Immigration Facts

When Access Alliance was founded in 1989, the immigration trend and immigrant population make up of Canada was quite different from what it is today. The number of permanent residents (immigrants and refugees) coming to Canada annually during the late 1980s was less than 100,000 compared to about 250,000 today. Canada also receives twice as many refugees (landed) currently compared to 20 years ago. The demographic composition of immigrants is particularly different, with percentage of immigrants from European origin declining substantially from 30.6% in 1986 to 16% in 2006.

With steady influx of immigrants (accounting for almost two-thirds of the population growth), the percentage of people born outside Canada reached almost 20% of the total population by 2006. In Toronto, the percentage of people born outside Canada increased from 38% in 1986 to almost 50% today. Corresponding to the changes in demographic composition of immigrants entering Canada,

### CANADA

|   | 1986  | 1996   | 2006   |
|---|---|--|--|
| Annual permanent residents (immigrants and refugees) arriving (CIC)             | 99,353  | 226,073  | 251,643  |
| Annual refugees (landed) arriving (CIC)   | 19,147  | 28,291   | 32,503   |
| Top 5 countries of origin for recent immigrants (previous 5 years, from Census) | (1991)<br>1. Hong Kong<br>2. Poland<br>3. China<br>4. India<br>5. Philippines | 1. Hong Kong<br>2. China<br>3. India<br>4. Philippines<br>5. Sri Lanka | 1. China<br>2. India<br>3. Philippines<br>4. Pakistan<br>5. U.S.A. |
| % of Immigrants of European origin (previous five years)                        | 30.6%   | 19%  | 16%  |
| % of population born outside of Canada  | 16.1%   | 17.4%  | 19.8%  |
| Language other than English or French spoken at home (% of total population)    |   | 9.0%   | 11.1%  |
| Mother tongue other than English or French (% of total population)              |   | 16.1%  | 19.7%  |
| Racialized Groups (visible minorities) as % of total population                 |   | 11.2%  | 16.2%  |
| % Recent Immigrants with university degree age 25 to 64                         |   | 28%  | 51%  |
| Unemployment Rate Recent Immigrants   | 7.1%  | 18%  | 11%  |
| % Low Income Recent Immigrants (previous year)                                  | 34%   | 50%  | 41.8%  |

### TORONTO

|   | 1986   | 1996   | 2006  |
|---|--------|--|---|
| Annual permanent residents (immigrants and refugees) coming to Toronto (CIC)      | 29,564 | 79,439   | 99,293  |
| % of population that are recent immigrants (previous 5 years) (City of Toronto)   | 3.1%   | 13.3%  | 10.8%   |
| Top 5 countries of origin for recent immigrants (previous 5 years)                |        | 1. Hong Kong<br>2. Sri Lanka<br>3. China<br>4. Philippines<br>5. India | 1. China<br>2. India<br>3. Philippines<br>4. Pakistan<br>5. Sri Lanka |
| Language other than English or French spoken at home (City of Toronto)            | 18.1%  | 28.8%  | 31.2%   |
| Mother tongue other than English or French (out of Total Responses)               | 27.9%  | 42.0%  | 46.9%   |
| % of population born outside of Canada (City of Toronto)                          | 40.6%  | 44%  | 50%   |
| Racialized Groups (visible minorities) as % of total population (City of Toronto) | 21%    | 37%  | 47%   |
| % Low Income Recent Immigrants (previous year)                                    |        | 53%  | 46%   |

Sources: Statistics Canada, Citizenship and Immigration Canada, CCSD Urban Poverty Project

## Access Alliance Over the Past 20 Years

the percentage of people in Canada with mother tongue other than English or French and the percentage of racialized people (visible minorities) has steadily increased over the last 20 years. The composition of racialized groups in Toronto has more than doubled from 21% in 1986 to 47% in 2006.

The education level of immigrants entering Canada has also changed significantly over the last two decades, particularly from mid 1990s onwards. The proportion of recent immigrants (those immigrated within the last 5 years) with university degree almost doubled from 28% in 1996 to 51% in 2006 (compared to only 20% of Canadian-born population with a university degree in 2006). Immigrants (between the ages of 25 and 64) in total account for nearly one-half (49%) of the doctorate holders in Canada and for 40% of adults with a master's degree.

While immigration during the last two decades has been the key sources of Canada's diversity and vitality, the socio-economic opportunities and status for immigrants (particularly recent immigrants) has steadily deteriorated compared to non-immigrants. While unemployment rate for recent immigrants was comparable to Canadian-born during mid 1980s, by mid 2000, recent immigrants had almost three times higher unemployment rate than Canadian-born (worse for recent immigrants from racialized backgrounds). Poverty rate among recent immigrants has worsened at an alarming rate. The deep economic recession of the early 1990s strongly impacted immigrants. The percent low-income for recent immigrants rose from 34% in 1985 to almost 50% by 1995; while the percent low-income for Canadian-born remained at about 17% during that period. The percent low-income for recent immigrants did decrease to 35.8% by 2000 only to increase to 41% by 2006 (2.7 times higher than for Canadian-born). Due to the current recession, the low-income rate for recent immigrants currently may have reached mid 1990s level or worse.

In response to these changes, Access Alliance has progressively shifted its focus to promoting "health with dignity" for the most disadvantaged newcomer populations in Toronto by directly addressing key social determinants of health for these communities.

|                                    | 1989   | 2009  |
|------------------------------------|--|---|
| <b>Communities served</b>          | 4: the founding communities  | 60+ languages and cultures  |
| <b>Staff</b>                       | 8  | 68  |
| <b>Membership</b>                  | 20   | 180   |
| <b>Budget</b>                      | \$ 144,000   | \$ 6,959,000  |
| <b>Locations</b>                   | <ul style="list-style-type: none"> <li>509 College St.</li> </ul>  | <ul style="list-style-type: none"> <li>340 College St.</li> <li>3040 Danforth Ave.</li> <li>881 Jane St.</li> </ul>   |
| <b>Programs / Activities</b>       | <p><b>7 including:</b></p> <ul style="list-style-type: none"> <li>AIDS street outreach</li> <li>Family Violence Prevention</li> <li>Pre-natal nutrition</li> <li>AIDS prevention</li> <li>Breastfeeding video</li> <li>Primary care service (1 Doctor and 1 Nurse)</li> <li>Interpreter service</li> </ul> | <p><b>43 including many programs and services for:</b></p> <ul style="list-style-type: none"> <li>Newcomer adults</li> <li>Women</li> <li>Parents and expectant parents</li> <li>LGBT community</li> <li>Youth, including delivery of over 25 programs out in the community</li> </ul> <p><b>Our core services have expanded to:</b></p> <ul style="list-style-type: none"> <li>Primary care service (3 Doctors, 6 Nurses, 2 Dietitians, 2 Social Workers, Family Support and Client Support Worker)</li> <li>Settlement Services for Newcomers and Immigrants</li> <li>Interpreter service</li> <li>Research Department</li> </ul> |
| <b>Community and Advocacy Work</b> | <p><b>2 Initiatives</b></p> <ul style="list-style-type: none"> <li>Drug Awareness health fair</li> <li>Health Promotion articles published in 4 languages</li> </ul>   | <p><b>26 Initiatives related to:</b></p> <ul style="list-style-type: none"> <li>Women's issues</li> <li>Family violence</li> <li>Maternal health</li> <li>Cancer prevention</li> <li>Diabetes prevention and treatment</li> <li>Child and parent development</li> <li>Mental health</li> <li>People without status</li> <li>Poverty and Income issues</li> </ul>  |
| <b>Interpretation languages</b>    | 15   | 68  |
| <b>Interpreter requests</b>        | 314  | Over 20,000 a year  |
| <b>Partnerships and networks</b>   | 3  | Over 100  |

## Our Funders / Donors (2008)

Access Alliance gratefully acknowledges the support of our funders/donors in 2008-2009.

### Funders:

- Associated Youth Services of Peel
- Attorney General Ontario Victim Services Secretariat
- Centre for Addiction and Mental Health (CAMH)
- Centre For Urban Health Initiatives (CUHI)
- CHUM Charitable Foundation
- Citizenship and Immigration Canada
- City of Toronto
- George Cedric Metcalf Foundation
- Health Force Ontario Initiatives – Health Human Resources Strategy Division – Ministry of Health and Long-Term Care
- Laidlaw Foundation
- Ministry of Health and Long-Term Care Toronto Central Local Health Integration Network
- Scarborough Addiction Services Partnership
- Service Canada – Canada Summer Jobs
- The Ontario Trillium Foundation
- The Provincial Centre of Excellence for Child and Youth Mental Health at CHEO
- The Public Health Agency of Canada
- United Way of Greater Toronto
- Wellesley Institute

### Donors:

- Ben and Hilda Katz
- Board and Staff members at Access Alliance
- CIBC
- F. K. Morrow Foundation
- IBM Employees' Charitable Fund
- Multi-Languages Corporation
- Scotia Bank

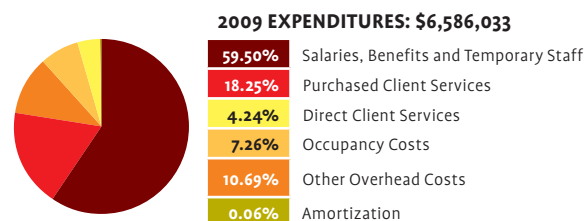
## FINANCIAL STATEMENTS (Audited)

Statement of combined Expenditures and Revenues  
For the year ended March 31, 2009

| EXPENDITURES                           | 2009             | 2008             |
|--|------------------|------------------|
| Salaries, Benefits and Temporary Staff | 3,918,241        | 2,936,040        |
| Purchased Client Services              | 1,201,633        | 819,093          |
| Direct Client Services                 | 279,456          | 537,361          |
| Occupancy Costs                        | 478,173          | 292,823          |
| Other Overhead Costs                   | 704,358          | 425,376          |
| Amortization                           | 4,172            | 9,704            |
| <b>Total Expenditure</b>               | <b>6,586,033</b> | <b>5,020,397</b> |

| REVENUE             | 2009      | 2008      |
|---------------------|-----------|-----------|
| Federal Grants      | 957,446   | 379,103   |
| Provincial Grants   | 4,107,175 | 3,658,711 |
| Municipal Grants    | 102,952   | 47,133    |
| United Way          | 218,200   | 28,408    |
| Foundations         | 98,076    | 106,800   |
| Interpretation Fees | 1,085,269 | 819,286   |
| Other               | 183,184   | 72,073    |

|  |                  |                  |
|--|------------------|------------------|
| <b>Total Revenue</b>                   | <b>6,752,302</b> | <b>5,111,514</b> |
| Capital Assets Adjustment              | 4,172            | 9,704            |
| Repayment to MOHLTC                    | (1,247)          | (40,520)         |
| Transfers to Restricted Reserves       | (169,194)        | (60,301)         |
| <b>Total Revenue minus Adjustments</b> | <b>6,586,033</b> | <b>5,020,397</b> |



## FUNDING 2009

### Federal

|                              |         |
|------------------------------|---------|
| Health Canada                | 37,307  |
| HRSD Canada                  | 6,004   |
| Citizen & Immigration Canada | 914,135 |

**957,446**

### Provincial

|                                  |           |
|----------------------------------|-----------|
| Local Health Integration Network | 3,190,965 |
| Non-recurring                    | 83,215    |
| Health Force Ontario             | 139,650   |
| Satellite                        | 683,672   |
| Min. of Attorney General         | 9,673     |

**4,107,175**

### Municipal

|                 |        |
|-----------------|--------|
| City of Toronto | 97,568 |
| Region of Peel  | 5,384  |

**102,952**

### United Way

**218,200**

### Foundations

|                            |        |
|----------------------------|--------|
| Trillium Foundation        | 59,478 |
| Metcalf Foundation         | 35,598 |
| CHUM Charitable Foundation | 3,000  |

**98,076**

### Other organizations

**55,058**

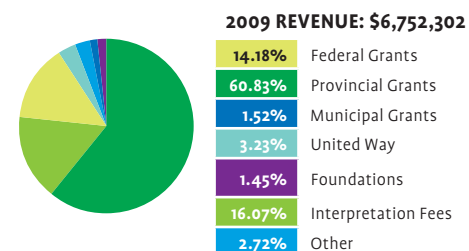
### Interpretation Fees

**1,085,269**

### Other

**128,126**

**6,752,302**





# STAFF 2008 to 2009

## MANAGEMENT & ADMINISTRATION TEAM

### Executive Director

Axelle Janczur

### Program Directors

Celia Fernandes  
Martha Arbutnot  
Cliff Ledwos  
Yogendra Shakya

### Data Management Coordinators

Brent Wilson  
My Dang

### Administrative Coordinator

Anabela Azevedo

### Finance Coordinator

Thushari Gomez

### Finance & Admin Assistant

Violetta Barczay

### Main Receptionist

Kyong Ha Ahn

### East Office Administrative Assistant

Sakshi Sood

## CLINICAL TEAM

### Community Health Nurses

Okhi Lee  
Roya Ali-Khanbegi

### Practical Nurses

Carla Moses  
Stephanie Douglas

### Nurse Practitioners

Barbara Berends  
Chris Bradley  
Jessica Audley

### Physicians

Bill Pegg  
Meb Rashid  
Susan Hoffmann  
Tyler Curtis

### Client Care Coordinator

Jasmine Li

### Social Worker

Renee Ferguson

### Nutrition Program Coordinator

Roxana Majdnia

### Medical Secretaries

Abby Kifle  
Antonia Alelulia

### Medical Records Clerk

Clara Lavery

### Clinical Services Coordinator

Celina Janeiro

## PROGRAM TEAM

### Women's Programs

Lindsay Angelow

### Family Programs

Thuy Tran

### Youth Coordinator

Salma Saadi

### Settlement Services Coordinator

GINNY SANTOS

### Youth Volunteer & Mentoring

### Program Coordinator

Gisela Vanzaghi

### Volunteers and Community

### Relations Coordinator

Helen Luu

### Community Health Worker

Roxanna Vahed

### Program Secretaries

Diana Wahidi  
Monica Diaz

### Settlement Counsellors

Anita Fortuno  
Fauzia Rana  
Mahbub-Ur Rahman  
Shankari Balendra  
Nisrine Maktebi  
Gladys Klestorny

### Youth Settlement Counsellor

Aisha Chapra

### Youth Outreach Workers

Golshan Abdmoulaie  
Aemer Esmail  
Jennifer Fernandes

### Peer Outreach Workers

Gulalai Akbari  
Mira Shrestha  
Moo Moo Say  
Nabegha Ali  
Wah Paw Lah

### Intake Services Coordinators

Helen De Oliveira  
Vera Kevic

### Staff interpreter

Laura Prado

### Research Coordinators

Ruth Wilson  
Rabea Murtaza

### Data Support and Evaluation Coordinator

Andrew Koch

### GARs Best Practices Project

Najmus Sadiq  
Reza Shidfar

### Migration and Diabetes Project

Qamar Zaidi  
Sivajini Savasamy

### Peer Researchers

Arzo Akbari  
Azza Khogali  
Sheila Htoo

## EXTERNAL PROVIDERS & CONSULTANTS

### Nurse Practitioners (Locum)

Barb Hood  
Gillian Graham

### Diabetes Educator (RN-Lamp)

Teesha James

### Epidemiologist-consultant

Dianne Patychuk

### Paediatrician

Anna Banerji

### Physician

Patrick Gonsalves

### Social Worker (TUHA MSW)

Adela Meneses

### Psychiatrists

Esther Elliot  
Martin Svihra

### Registered Dietitian

Samantha Lin

### Peer Reserachers,

### Migration & Diabetes Project

Khaleda Yesmin  
Ying Zhou

### Researcher

Khoaja Mohammad Khaled

### Project Coordinator, Newcomer

### Youth Mental Health Project

Tahira Gonsalves

## THANK YOU & GOODBYE TO

Ambreen Akbar  
Barbara Blays  
Beverly Brockest  
Carolina Berinstein  
Christine Tavares  
Christine Tyrell  
Hadia Dib  
Jose Silveira  
Margaret Pimentel  
Mimi Hnin  
Nazifeh Samimi  
Patrick Salvani  
Rachna Contractor  
Salwa Bol  
Sheida Bamdad  
Shirley Chambers  
William Mood  
Zaroonrunissa Zaroonrunissa

## STUDENTS

### MD Resident

Nicole Moss

### Settlement and Integration

Adriann

### Settlement and Integration Assistant

Christina Tavares

### CBR Research Assistant

Corinne Alstrom

### Administrative Assistant

Clara Lavery

### Medical Resident

Heather Wiedmeyer

### Nursing Student, Ryerson

Irina Brener

### MSW students

Gabriela Agatiello  
Theon Harrichand

## VOLUNTEERS

Akansha Akansha  
Ali Ahmad Abdul Samad  
Anna Loi  
Ameer Anwari  
Bhowattee (Ann) Ramroop  
Bursheen Ramzan-Sheena  
Carlos Robayo  
Dina Abdel Shahid  
Dolores Sanguedolce  
Elizabeth Valled Alva  
Fatema Mohammad  
Ferishta Mohammad  
Golda Oneka  
Granthana Prephoit  
Granthana Purohit  
Karimeh Hoseini  
Lalitha Thavendrarasa  
Manijeh Ebrahimi  
Mariana V. Rott  
MD Tanvir Ahmed  
Meagan Tunbridge  
Mohadise Islami  
Mostara Mohammad  
Nadia Chowdhury  
Najibeh Hoseini  
Omar Ali  
Sarah Paner  
Shakila Ebrahimi  
Veronica Gonzalez  
Yambo Naga  
Yodit Teclemariam  
Zahra P. Mohammad

In memory of our colleague, John McVey,  
who passed away on March 29, 2009.

  
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www.arrowgrafix.com

We would like to thank  
**Newbury Ng and Arrow  
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their generous support.



United Way  
Toronto

A United Way member agency



Ontario's Community  
Health Centres



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