

PROCEEDINGS REPORT

2023

The Annual Health Equity Summit, hosted by CASSA, is dedicated to addressing health disparities that disproportionately affect marginalized communities, with a particular focus on South Asian and other racialized groups – through the exchange of knowledge between key stakeholders.

HOSTED BY:



COUNCIL OF
AGENCIES SERVING
SOUTH ASIANS

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INTRODUCTION

About Council of Agencies Serving South Asians (CASSA)

The [Council of Agencies Serving South Asians \(CASSA\)](#) is an umbrella organization that supports and advocates on behalf of existing as well as emerging South Asian agencies, groups, and communities in order to address their diverse and dynamic needs.

Mission

To facilitate the economic, social, political and cultural empowerment of South Asians by serving as a resource for information, research, mobilization, service delivery coordination and leadership on social justice issues affecting our communities. We aim to create social change by building alliances and working collaboratively with those who share a vision of empowering all communities to participate in defining Canada's future.

Vision

We envision and strive for a Canada free of all forms of discrimination, racism, and hate; in which all communities are free from marginalization and are fully empowered to participate in defining Canada's political, economic, social, and cultural future.

Values

The following values serve as guidelines for our conduct as we implement our mission and work toward our vision:

- **Social Justice:** We are committed to working within a social justice framework which promotes equity and empowerment for marginalized peoples and communities.
- **Anti-oppression, Anti-racism, Anti-homophobia:** We strive to incorporate anti-oppressive, anti-racist, anti-hate and anti-homophobic principles and practices in our work.
- **Responsiveness:** We strive to work through a variety of consultative and participatory structures and practices to ensure that our work is grounded in the changing realities and priorities of our communities.
- **Diversity:** We recognize and respect the diversity among and within South Asian communities and within Canadian society.
- **Collaboration and solidarity:** We are committed to building alliances in order to work collectively with Black, Indigenous, and other Peoples of Color (BIPOC) towards common aims.
- **Accountability:** We are committed to maintaining effective governance, measurement and reporting practices.



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About CASSA's Annual Health Equity Summit

The [Annual Health Equity Summit](#), hosted by CASSA, is dedicated to addressing health disparities that disproportionately affect marginalized communities, with a particular focus on South Asian and other racialized groups. This highly anticipated event serves as a platform for key stakeholders, including experts, community leaders, policymakers, healthcare professionals, and advocates, to come together and collectively work towards achieving health equity.

The Summit explores a diverse range of pressing health topics, covering areas such as chronic diseases, mental health & addiction, sexual health, social determinants of health (SDoH), policy-making, advocacy, and best practices. These comprehensive discussions shed light on the underlying causes of health disparities and facilitate the development of effective strategies to address them.

Characterized by vibrant exchanges of knowledge, experiences, and ideas, the Summit encourages participants to share their expertise and insights to drive positive change. It creates a unique space for collaboration, encouraging stakeholders to identify and address the complex societal, economic, and cultural factors that contribute to health inequalities.

Through open dialogue, impactful presentations, interactive workshops, and networking, the Annual Health Equity Summit empowers individuals and communities. The Summit creates a transformative environment where diverse voices are heard, collective wisdom is harnessed, and equity-focused strategies are conceptualized. It serves as a catalyst for mobilizing efforts to achieve health equity, ensuring equitable and quality healthcare services for all.

Our Mission

Our mission is to promote health equity by addressing disparities and advocating for equitable healthcare for all individuals and communities. Grounded in a comprehensive analysis of the SDoH, we strive to create meaningful impact through collaborative strategies and community engagement.

Key elements of our mission include:

1. **Advocacy:** We actively advocate for policies, initiatives, and practices that improve health outcomes and reduce disparities, with a particular focus on South Asian and other racialized communities. We build coalitions and push for a South Asian Health Strategy for Ontario.
2. **Accessible, Anti-oppressive and Culturally Responsive Care:** We work towards the development and implementation of healthcare strategies that are culturally and linguistically accessible, ensuring that individuals from diverse backgrounds can access quality care and services without barriers.
3. **Mental Health Support:** We are dedicated to supporting the development of anti-oppressive mental health tools, services, and resources that are specifically tailored to meet the needs of South Asian communities, addressing the unique challenges they may face.
4. **Research and Disaggregated Data:** We advocate for, support, secure, and disseminate research initiatives that highlight health disparities and promote race-based disaggregated data



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collection. By advancing knowledge in these areas, we strive to inform evidence-based solutions and policies.

5. **Empowerment and Well-being:** Our mission includes championing healthcare services and practices that empower South Asians to enhance their health, well-being, and independence, enabling them to thrive and lead fulfilling lives.

EXECUTIVE SUMMARY

Event Name: CASSA's 12th Annual Health Equity Summit

Theme: South Asian Youth Perspective on Health Equity & Inclusion

Date: November 7 (Tues.), 2023

Time: 9:30 AM to 4:00 PM (EST)

Venue: Centennial College Progress Campus – 937 Progress Ave. Toronto, ON M1G 3T8

Partners: Centennial College and [United Way Greater Toronto \(UWGT\)](#)

Sponsor: [Punjabi Community Health Services \(PHCS\)](#)

Attendance: 90

Recordings: Available on YouTube at CASSA Online ([Highlights, Part 1](#), & [Part 2](#))

General Overview

CASSA's 12th Annual Health Equity Summit is titled **South Asian Youth Perspective on Health Equity & Inclusion**.

In today's rapidly evolving world, ensuring health equity and fostering inclusivity have become paramount, particularly when it comes to addressing the needs of youth aged 16-30. It is essential to recognize the unique experiences, challenges, and perspectives of diverse youth populations, including youth with mental health and disabilities, youth experiencing homelessness, and international students. By engaging in open and inclusive discussions that amplify their voices, we can work towards addressing the existing disparities in health support, promoting overall well-being, and ultimately building a more equitable and compassionate society that uplifts all members of the youth population.

The Summit featured a lineup of eight esteemed experts, each contributing their valuable insights and expertise. Amrit Parhat took the stage as the keynote speaker, addressing the theme of 'Youth as Catalysts for Change: Amplifying South Asian Voices in Health Equity.' During the breakout sessions, Summayah Poonah guided participants through the transformative journey of 'Breaking Stigma and Building Resilience: Advancing Health Equity for Youth with Mental Health and Disabilities.' Meanwhile, the dynamic duo of Dr. Shivajan Sivapalan and Sejal Ketyal led a session titled 'Inclusion without Borders: Advancing Health Equity for International Students.' Dr. Naomi Thulien delved into a critical session titled 'Beyond the Streets: Advancing Health Equity for Youth Experiencing Homelessness'. The plenary session, 'Cultivating Youth Leadership: Empowering South Asian Youth for Health Equity Advocacy,' featured an impressive lineup of speakers including Almeera Khalid, Eraj Waqar, Fairuz Karim, and Manvir Bhangu.

The Summit was held on **Tuesday, November 7, 2023** from **9:30 AM to 4:00 PM**, and took place at the **Centennial College Progress Campus Event Centre**.

Agenda

Time	Sessions	Speakers
9:30 - 10:00 AM	REGISTRATION, BREAKFAST, & NETWORKING	
10:00 - 10:15 AM	OPENING REMARKS	Bharat Saini Nation Cheong Véronique Henry
10:15 - 11:15 AM	KEYNOTE SESSION	
	Youth as Catalysts for Change: Amplifying South Asian Voices in Health Equity	Amrit Parhar
11:15 AM - 12:30 PM	LUNCH, ROUNDTABLE SESSION, & NETWORKING	
12:30 - 2:00 PM	BREAKOUT SESSIONS	
	Breaking Stigma and Building Resilience: Advancing Health Equity for Youth with Mental Health and Disabilities	Summayah Poonah
	Inclusion without Borders: Advancing Health Equity for International Students	Dr. Shivajan Sivapalan Sejal Ketyal
	Beyond the Streets: Advancing Health Equity for Youth Experiencing Homelessness	Dr. Naomi Thulien
2:00 - 2:30 PM	MINDFULNESS BREAK & SNACK	
2:30 - 3:50 PM	PLENARY SESSION	
2:30 - 3:30 PM	Structured Q&As	Almeera Khalid Eraj Waqar
3:30 - 3:50 PM	Audience Q&As	Fairuz Karim Manvir Bhangu
3:50 - 4:00 PM	CLOSING REMARKS	

Speaker Biographies

Speaker	Biography
KEYNOTE SESSION	
Youth as Catalysts for Change: Amplifying South Asian Voices in Health Equity	
Amrit Parhar <i>Acting Executive Director</i> Institute for Change Leaders	Amrit Parhar is the Acting Executive Director at the Institute for Change Leaders (ICL). She believes that through collective action we can make social change and build stronger communities, especially through the power of storytelling. She completed her Masters while working at ICL, focusing on issues related to the refugee and immigration system, early childhood education, mental health, anti-racism, gender-based violence and more. She is also a facilitator with the Institute for Change Leaders and has completed a certification for the Train the Trainer program through the Leading Change Network. Amrit holds a Bachelor’s degree in Criminology and a Master’s degree in Immigration and Settlement Studies at Toronto Metropolitan University.
BREAKOUT SESSIONS	
Journey to Breaking Stigma, Building Resilience: Advancing Health Equity for Youth with Mental Health and Disabilities	
Summayah Poonah <i>Director</i> Naseeha Mental Health	Summayah Poonah is the Director at Naseeha, an organization deeply committed to the empowerment of individuals through mental health education. At Naseeha, the focus is clear: to instill a profound understanding of one's mental well-being and foster care systems that benefit not only the individual but also loved ones and the broader society. Driven by data and the identified needs from their community helpline, Summayah and her team engage with stakeholders to provide targeted educational solutions. Recognizing the unfortunate stigma surrounding mental health, often exacerbated by myths and conceptions, Summayah's mission goes beyond mere awareness. She is at the forefront of countering that stigma, championing the creation and dissemination of evidence-based resources. In an age where mental well-being is often overlooked, she stands as a beacon of hope, ensuring that knowledge isn't just acquired, but translated and disseminated to cultivate a more compassionate and understanding society.
Inclusion without Borders: Advancing Health Equity for International Students	

<p>Dr. Shivajan Sivapalan <i>Campus Clinic Physician</i> Campus Health and Wellness Centre for Durham College and Ontario Tech University Students</p>	<p>Dr. Sivapalan, a seasoned family physician with ten years of practice in the Greater Toronto Area, is dedicated to serving underrepresented communities. Leveraging his medical knowledge, clinical expertise, and a compassionate approach, he actively engages in applied research. His primary focus is the development of accessible tools and resources aimed at promoting health equity within these communities. As a campus clinic physician, Dr. Sivapalan is committed to enhancing support systems for international students. His ongoing research revolves around improving healthcare access for this demographic. Currently, he is engaged in a knowledge synthesis grant project aimed at gaining a deeper understanding of gender-based violence within the same community.</p>
<p>Sejal Katyal <i>Research Assistant</i> SAAAC Autism Centre</p>	<p>Sejal is a recent graduate from University of Guelph (B.A.H.), where she majored in Psychology and minored in Mathematical Sciences. Sejal hopes to pursue graduate studies in Clinical Psychology, with a focus on evaluating</p> <ul style="list-style-type: none"> ● emotional regulation in collectivistic societies ● the efficacy of current services and practices for racialized groups ● the sociocultural impact on collectivistic families with children with autism. <p>Currently, Sejal is working as an Instructor Therapist with Autism Behavioural Services Inc. to implement Applied Behavior Analysis (ABA) therapy for children with Autism Spectrum Disorder, as well as a research assistant for SAAAC Autism Centre.</p>
<p>Beyond the Streets: Advancing Health Equity for Youth Experiencing Homelessness</p>	
<p>Dr. Naomi Thulien <i>Investigator</i> MAP Centre for Urban Health Solutions</p>	<p>Dr. Naomi Thulien is a nurse practitioner and researcher committed to working with the community – including young people with lived expertise – to tackle the social and structural inequities that cause and perpetuate youth homelessness. Dr. Thulien is an investigator at MAP Centre for Urban Health Solutions, a research institute at St. Michael’s Hospital in Toronto focused on health equity. She is also an assistant professor (status only) at the University of Toronto Dalla Lana School of Public Health. In 2021, Dr. Thulien and her husband created Breakwater Foundation – a non-profit organization that provides rent subsidies, education bursaries, and primary health care to young women who have experienced homelessness.</p>
<p>PLENARY SESSION</p>	
<p>Cultivating Youth Leadership: Empowering South Asian Youth for Health Equity Advocacy</p>	



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<p>Eraj Waqar <i>Youth Leader/ Facilitator/ Mentor/ Non-Profit Professional</i> United Way Greater Toronto</p>	<p>Eraj is a dynamic advocate and visionary leader with a strong commitment to promoting gender equality, youth empowerment, and social justice. With a solid foundation in community engagement and a deep understanding of the challenges faced by marginalized populations, Eraj brings a wealth of experience and expertise to the forefront of her mission. Her role as a South Asian Community Advisory Council Member at United Way of Peel Region reflects her commitment to addressing service gaps and strengthening her community's needs. Through her diverse roles, Eraj has consistently demonstrated her ability to coordinate projects and engage youth in meaningful ways. Her intersectional approach, combined with her cultural competence and leadership skills, positions her as a force of positive change.</p>
<p>Fairuz Karim <i>Module Development Coordinator</i> Foundation for Medical Practice Education</p>	<p>Fairuz Karim is a recent graduate of the Translational Research Program from the University of Toronto. Fairuz immigrated to Canada from Bangladesh and grew up near Toronto. She is passionate about the intersectionality of community health, health equity, intersectionality, and youth engagement. Fairuz currently works as a Module Development Coordinator at the Foundation for Medical Practice Education at McMaster University, where she is involved in researching, developing, and writing evidence-based modules for family physicians. Fairuz has conducted research and worked with the Samuel Centre for Social Connectedness, Meal Exchange Canada, the McMaster Research Shop, and the Sickle Cell Awareness Group of Ontario. Fairuz's work focuses predominantly on health and inclusion, drawing upon her lived experience to advocate for better health for all.</p>
<p>Manvir Bhangu <i>Executive Director & Founder</i> Laadliyan, Celebrating & Empowering Daughters</p>	<p>Manvir Bhangu is a dedicated community builder with over a decade of experience in gender equity, human rights, youth and community engagement, research, immigration, and settlement. She is the founder of Laadliyan (laad-lee-ah), a non-profit empowering South Asian daughters through education, engagement and awareness. Laadliyan has directly impacted over 12,000 girls and women through mentorship opportunities, access to menstrual hygiene, bridging intergenerational divides and much more. Manvir's accomplishments include being named in Brampton's Top 40 under 40 in 2018, winning the Women Working in Social Activism Award in 2022, and receiving the Young Woman of Distinction Award from YWCA Toronto in 2023.</p>
<p>Almeera Khalid <i>Public Policy Consultant</i></p>	<p>Almeera Khalid is a public policy consultant and holds a MSc in Forced Migration and International Development from the University of Oxford.</p>

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Almeera is a tri-sector policy professional--with experience in civil society, the private sector and United Nations (UN) entities.

She specializes in migration, human rights, and gender, and has worked with UN agencies and research institutions. She is passionate about addressing social and political issues and is a strong advocate for gender justice. She is currently the head delegate representing Canadian youth at the World Bank Group and the International Monetary Fund (IMF) Annual Meetings this year.

PLENARY SESSIONS

Keynote Session

Youth as Catalysts for Change: Amplifying South Asian Voices in Health Equity

Amrit Parhar, the Acting Executive Director of the [Institute for Change Leaders \(ICL\)](#), shared a powerful and personal narrative emphasizing the transformative impact of stories in driving change. Born and raised in a suburban area of Markham, Amrit's childhood home was far from a sanctuary, marked by an abusive and alcoholic father. After enduring years of turmoil, she summoned the courage to move out—a rarity in the South Asian community, where children typically leave their childhood homes only after marriage.

Reflecting on her own journey, Amrit highlighted education as a passport to freedom and escape from the oppressive environment. She found her voice at the age of 13, rejecting societal expectations and embracing the opportunity to speak up. Moving out, she discovered a sanctuary for healing and hope, contrasting with the ongoing struggles of her mother and brother.

The presentation delved into Amrit's advocacy for mental health support, acknowledging the barriers she faced in accessing timely assistance. She later initiated a campus-wide referendum for improved mental health resources, emphasizing culturally-sensitive support. Collaborating with discontented students, they became catalysts for change, recognizing the disproportionate impact of systemic racism on marginalized communities' access to healthcare.

Amrit transitioned from her personal narrative to delve into the broader significance of storytelling. She outlined a three-tiered approach: Outside, focusing on collective strength and messaging; Air, delving into internal dynamics and communication strategies; and Ground, involving community engagement, problem definition, goal setting, narrative crafting, team recruitment, and strategic planning. This comprehensive strategy ensures a powerful and efficient storytelling framework for driving positive change.

The presentation then explored the transformative journey from stagnation to motivation, emphasizing psychological shifts from inertia to urgency, apathy to anger, fear to hope, and isolation to solidarity. The concept of "You Can Make A Difference" (YCMAD) is introduced as a powerful antidote to self-doubt. The role of storytelling is highlighted as a tool to mobilize emotions, communicate values, and engage others in collective action, ultimately contributing to achieving health equity.

Amrit suggested learning the skill of telling stories about oneself, the community, and the necessary actions for change. The audience's response to memorable stories reveals key attributes: relatability, authenticity, human interest, emotional impact, lessons, breakthroughs, childhood connections, and genuineness.

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The presentation delved into how stories teach morals, values, lessons, and decision-making through the example of the Tortoise and the Hare. It encourages individuals not to let others dictate their capabilities, emphasizing the principle that "slow and steady wins the race."

Stories' ability to move people to action is explained, illustrating the progression from values to emotions and ultimately action. The three key elements of public narrative structure—Challenge, Choice, Outcome—are presented as a framework for compelling storytelling, inspiring listeners to reflect on their values, challenges, and choices.

The three parts of public narrative—Self, Us, Now—are identified as crucial for effective communication and engagement. Combining these elements involves finding common threads in personal and communal values, addressing challenges that demand immediate action, and using characters to encourage self-reflection.

The role of stories in organizing and advocacy is discussed, emphasizing the connection between strategy (Head), action (Hands), and story motivation (Heart). The presentation urges individuals to share their stories courageously, combat disparities, promote awareness, advocate for policies, and engage with the community and decision-makers.

Amrit concluded with a poignant quote by Richard Wagamese, reinforcing the idea that collectively sharing stories can lead to personal growth, mutual recognition, and ultimately contribute to changing the world, one narrative at a time.

Panel Discussion

Cultivating Youth Leadership: Empowering South Asian Youth for Health Equity Advocacy

This plenary session featured insights from four distinguished panelists, Eraj Waqar, Manvir Bhangu, Almeera Khalid, and Fairuz Karim. The discussion aimed to explore various strategies for nurturing leadership skills among South Asian youth, providing them with mentorship opportunities and creating platforms for advocacy in both personal health and community well-being. The session highlighted successful initiatives that have effectively empowered youth leaders, emphasizing their ability to drive positive change. The panelists shared inspiring stories of youth-driven transformations, shedding light on the significant impact of youth engagement in fostering health equity within the South Asian community.

The Moderator led a discussion with the speakers, delving into the following questions. Below, you'll find the captured responses from the speakers:

1. *How can we effectively identify and nurture leadership potential in South Asian youth, especially those from underrepresented communities?*
 - Eraj Waqar emphasized the importance of overcoming self-doubt and taking action, encouraging individuals to embrace mistakes as part of the learning process. She advocates for a message of inclusivity, asserting that everyone, regardless of background, deserves a place in leadership. To empower South Asian youth, she suggested creating opportunities and programs tailored to identify and nurture leadership potential. Additionally, Eraj highlighted the need for inclusivity and educational sharing when designing programs for this demographic.
 - Manvir Bhangu challenged the conventional perception of leadership, asserting that everyone possesses leadership qualities in their unique ways. She reflected on the limitations placed on South Asian girls regarding leadership and advocates for promoting bravery and self-advocacy. Manvir stressed the importance of addressing mental health within the South Asian community, emphasizing the need to go beyond physical well-being. She encourages individuals to identify leadership in diverse voices and bring those voices forward.
 - Almeera Khalid emphasized the concept of "passing the elevator down," highlighting the role of support from women who share similar backgrounds. She stressed the significance of mentorship and sponsorship in fostering leadership potential. Almeera encourages young women and South Asian youth to build connections beyond mere resume screening, focusing on creating networks and engaging in meaningful conversations.
 - Fairuz Karim highlighted the importance of recognizing and celebrating the achievements of emerging leaders. She advocates for continuous support and resources for youth, particularly those from underrepresented communities facing challenges in accessing resources. Fairuz proposed strategies such as community-based projects, local and sustainable youth interventions, and capacity-building workshops. These initiatives

aim to develop essential leadership skills, including teamwork, communication, and problem-solving.

2. *Can you share inspiring stories or examples of youth-driven transformations that have had a significant impact on South Asian health equity?*
 - Eraj Waqar shared the inspiring example of "Soch Mental Health," an organization that focuses on transforming the landscape of mental health information sharing. She highlighted the use of micro-grants for youth, making information more accessible. Eraj encourages volunteering for causes one is passionate about and stresses the significance of effective communication for generating innovative ideas. She emphasized networking with authenticity, keeping learning at the forefront, and promoting mentorship for newcomers to help them build essential connections.
 - Manvir Bhangu presented the impactful youth-driven initiative "Udaari" (meaning leap), a program designed for international South Asian students, particularly young women. The program addresses sensitive topics such as sexual health and mental health, creating a space for open dialogue. Manvir advocates for debunking traditional gender roles in health discussions and stresses collaboration with existing organizations and projects. She highlighted the potential of social media as a tool for creating meaningful impact and amplifying voices.
 - Almeera Khalid reflected on the youth-driven transformations during the pandemic, where women and youth mobilized to correct misinformation about COVID-19 and vaccines. She noticed the increased focus on community-based health inequity research, emphasizing the importance of data for informed policies and funding. Almeera highlighted grassroots organizing and community-based research as vehicles for creating programs and acquiring resources to address health disparities.
 - Fairuz Karim discussed the research focus on youth mental health from an immigrant and South Asian perspective. She acknowledged the remarkable work done by youth in this field and emphasized the importance of amplifying the voices of South Asian youth to combat stigma. Fairuz advocates for creative and culturally competent approaches to addressing mental health issues, focusing on cultivating youth leadership through programs that support skill development and maximize their potential impact.
3. *What are the potential opportunities and challenges in fostering collaboration between South Asian youth advocates and established leaders in the field of health equity?*
 - Manvir Bhangu identified numerous opportunities in collaboration between South Asian youth advocates and established leaders in health equity. She highlighted existing positive initiatives across the country, emphasizing the potential for gathering, amplifying, and supporting more young advocates. The use of social media is recognized as a powerful tool for educational awareness, allowing grassroots organizations to thrive. Despite the proactive nature of young people, challenges include the invisibility of certain health issues and the dominance of specific communities. The need for

- diverse leadership and discussions on various challenges faced by different South Asian groups is emphasized.
- Eraj Waqar highlighted the challenges faced in achieving health equity, particularly when considering broader issues such as housing and employment. She stressed the interconnectedness of these factors and advocates for a holistic approach, acknowledging the disconnect between expectations and reality. Eraj emphasized the importance of incentivizing young people to stay engaged in training and programs, pointing out a missing piece in the transition to employment.
 - Almeera Khalid echoed the significance of collaboration, emphasizing the importance of community-based research rooted in lived experiences. She discussed the South Asian Tamil Women Collective's work in understanding generational changes in mental health and overall health for knowledge transfer. Almeera underscored the value of sponsorship, mentorship, and continuous networking to seek advice and leverage connections.
 - Fairuz Karim highlighted the potential for knowledge exchange between youth advocates and established leaders, bringing innovative ideas to the forefront. She shared a practical example of collaboration with the Samuel Centre for Social Connectedness, focusing on post-secondary students, food insecurity, and mental health. Fairuz emphasized the importance of capacity building through collaboration and cross-sectional, intergenerational efforts. Challenges include power dynamics, with concerns about whether youth voices are truly heard, as well as long-term commitment, availability, and priority in sustaining collaborative initiatives.
4. *How can we effectively use technology and social media in cultivating youth leadership?*
- Eraj Waqar emphasized the importance of accuracy and legitimacy when using technology and social media. She advocates for leveraging social media platforms through campaigns, volunteer work, and supporting causes to raise awareness. Eraj advised being mindful of the dos and don'ts of social media use and adhering to guidelines while promoting passion-driven content.
 - Manvir Bhangu recognizes social media as a powerful tool and suggests tailoring content to specific audiences on different platforms. She emphasized responsibility in disseminating correct information through online campaigns and recommended generating content in multiple languages for broader understanding. Manvir highlighted the potential of social media in raising awareness on health equity, while acknowledging potential challenges such as censorship.
 - Almeera Khalid acknowledged a potential disconnect between young people and other generations in mobilizing efforts. She suggested that organizations lacking effective social media strategies should engage young people for assistance. Almeera highlighted the broad reach of social media and advises organizations to consider their engagement and advocacy strategies to garner the necessary support online.
 - Fairuz Karim provided examples of youth using Instagram to create awareness about community issues during the pandemic. She cited instances where social media was

instrumental in shedding light on topics such as access to public toilets. Fairuz emphasized the learning opportunities and skill development that social media offers to youth, facilitating personal growth and community outreach. She underscored the role of social media in bridging gaps within communities.

After the discussion, attendees posed the following question to the speakers:

1. *How can South Asian community leaders and advocates actively engage in raising awareness about health equity within their communities?*
 - Manvir Bhangu drew attention to the lack of discourse around international students within the South Asian community. She urges community leaders and advocates to adopt a proactive approach, emphasizing the need to address issues such as exploitation, unsafe housing, underpayment, and mental health support for international students. Manvir stressed the importance of recognizing these challenges as collective problems that require a shared responsibility within the community. She advocates for raising collective awareness to initiate meaningful change.

2. *Addressing the issue of youth empowerment, as an international student, I find it challenging to express my potential and leadership skills due to the struggle to meet my basic physiological needs. Many of us face difficulties with high tuition fees and the overall cost of living in Canada, hindering our ability to focus on personal and professional development. Despite these challenges, we aspire to establish ourselves as leaders. What advice can you offer to international students navigating these financial obstacles, enabling us to overcome these hurdles and pursue our leadership goals?*
 - Manvir Bhangu acknowledged the struggles faced by international students, particularly young women, and commended them for their leadership in taking the leap to study in a new country. She encouraged perseverance and building networks, emphasizing the role of academic institutions in providing support and guidance. Manvir suggested tapping into resources available at colleges to navigate challenges and continue the journey toward leadership.
 - Fairuz Karim addressed the specific challenges of food insecurity and mental health issues faced by international students. She pointed out that campuses are implementing creative initiatives to address these concerns. Fairuz advised international students to explore opportunities within both the campus and local community that cater to international experiences. Additionally, she recommended engaging in community-based research to better understand challenges and actively contribute to creating solutions.

Roundtable Session

Empowering Racialized Experts: Tackling Systemic Barriers in Research and Funding on South Asian Health

This roundtable session focused on the critical issue of systemic barriers faced by racialized experts in the fields of research and funding. Racialized individuals often encounter unique challenges that hinder their professional growth, hamper their access to resources, and impede their contributions to the research landscape. The objective of this session was to uncover the systemic inequities present within research and funding systems, with the overarching goal of proposing actionable solutions that empower racialized experts.

In recent years, CASSA has forged collaborative partnerships with key entities such as the Social Sciences and Humanities Research Council (SSHRC) and the Canadian Institutes of Health Research (CIHR) to dismantle these barriers for racialized researchers. Leveraging the insights garnered from our discussions, CASSA is strategically positioned to engage with research funding bodies in follow-up initiatives, intending to advocate for and implement measures that enhance accessibility to funding for racialized researchers.

The facilitators led a thought-provoking discussion with the attendees, delving into the following questions. Below, you'll find the captured and categorized insightful responses from the participants:

1. *Have you personally experienced or witnessed instances of systemic barriers and discrimination in research and funding processes, and if so, what were the key challenges you encountered?*

Data Representation and Collection:

- Data Aggregation in South Asian Research:
 - Researchers often aggregate data in South Asian research, oversimplifying the diversity within the community. There's a pressing need to shift towards disaggregated data analysis to capture the nuanced experiences of individuals within this demographic.
- Cultural Competency and Funding Channels:
 - Engaging larger organizations poses challenges in ascertaining cultural competency. Establishing a cultural bridge is vital; this involves active participation in grassroots initiatives to foster cultural understanding and promote effective funding channels aligned with diverse cultural needs.
- Communication, Transparency, & Data Governance in Research:
 - When researchers approach the South Asian community for data collection, it's common for the outcome of the study to be unknown. Transparency is crucial; researchers should communicate the purpose, progress, and outcomes of their studies to demonstrate the value of the research to both participants and organizations involved.
 - Challenges in data management disproportionately impact marginalized communities, emphasizing the critical necessity for robust data governance.
- Representation of Diverse Lived Experiences:

- A critical facet of the research challenge is the underrepresentation of diverse lived experiences, especially across generations. Research endeavors must embrace this diversity, ensuring that data collection and interpretation reflect distinct perspectives of different age groups.

Challenges Faced by Various Communities

- International Students in Education System:
 - Discriminatory policies, limited paid hours, and lack of support funds present challenges for international students. Additionally, there's a noted lack of funds and scholarships available to support them.
 - International students face challenges in accessing placement opportunities, considering factors like timing and expenses
- Challenges in Racialized and Indigenous Communities:
 - Racialized and Indigenous groups confront complex challenges, including instances of identity fraud in areas where funding is allocated but fails to reach legitimate members. Mistrust in fund utilization, coupled with experiences of racism and unconscious biases in the field, compounds these multifaceted issues.
 - Effectively addressing these challenges demands a nuanced approach to funding, comprehensive support mechanisms, and targeted efforts to combat discrimination, particularly within the peer review process, where racialized individuals face disproportionate hurdles.
- Language Barriers and Stereotypes in Research:
 - Encountering language barriers in research poses significant challenges. Limited funds and budget constraints made it difficult to afford translators.
 - Navigating diversity in religion and avoiding stereotypes required heightened awareness to accurately understand the perspectives of research participants.

Awareness and Access to Resources

- Lack of Awareness and Resources:
 - Bridging the gap in effective research and funding requires increased awareness of available data resources and their applications.
 - Lack of awareness among students about community services and limited resources further contribute to challenges and barriers.
 - Limited access to online tools poses challenges, impacting research and communication.
- Issues of Discrimination and Bias:
 - Discrimination hinders access to future education, research opportunities, and/funding.
 - Gender bias in peer review processes impacts success rates for racialized individuals.
- Research Focus and Funding Access:
 - Researchers identify the need for research based on existing knowledge gaps, societal issues, or the desire to improve understanding within the South Asian community. Obstacles in deciding which community to help, recognizing barriers in discrimination, and facing challenges in acknowledging the need for research.

- Challenges arise when funding from a specific source, like a government body, faces obstacles if the research is not perceived as valid or applicable outside the South Asian community.
 - Questions about why certain organizations receive funding and the need for justification.
 - Accessibility for Persons with Disabilities:
 - Research and funding must address accessibility for those with disabilities, highlighting the ways institutions continue to isolate accessibility.
2. *What strategies or initiatives do you believe can be effective in dismantling systemic barriers and promoting diversity and inclusion in research and funding for South Asian health issues?*

Education and Awareness Initiatives

- Comprehensive Programs and Narrative Creation:
 - Develop and implement multifaceted education and awareness programs targeting specific South Asian health issues.
 - Craft impactful narratives highlighting the challenges to diversity and inclusion promotion, shedding light on the urgency for change.
- Cultural Competency and Ethno-Specific Advantages:
 - Provide researchers with cultural competency training to enhance their understanding of South Asian cultures and health practices. This can help researchers approach their work with sensitivity and better engage with the communities they aim to study.
 - Explore the advantages of being ethno-specific, emphasizing the value of trust and cultural expertise in securing preferred funding.
- Advocacy and Integration of Immigrants:
 - Advocate for policy change and inclusivity through organizations like CASSA, emphasizing the importance of equitable opportunities.
 - Emphasize the inclusion of citizen immigrants in settlement programs, recognizing the ongoing cultural shock even after several years in a new country.
- Individual Education and Mental Health Reframing:
 - Educate individuals, including immigrants and families, about research methodologies, the significance of interviews, and potential biases.
 - Reframe language on mental health for different generations, ensuring accessibility and relatability across diverse cultural perspectives.
- Support Staff Advocacy:
 - Advocate for trained support staff, such as nurses, to address students' health needs directly, reducing the burden on public hospitals and clinics.
 - Enhance the accessibility and quality of healthcare for students through strategic support services.

Proactive Community Engagement

- Change Strategies Ownership:

- Promote proactive change strategies, encouraging individuals to take ownership of diversity and inclusion initiatives within their communities.
- Student Empowerment and Cultural Practices:
 - Inform students about health insurance, policies, and accessing health funding, empowering them to navigate the healthcare system effectively.
 - Create culturally informed practices for inclusivity, fostering an environment that respects and adapts to diverse cultural needs.
- Community Sharing and Race-Based Data Sensitivity:
 - Encourage community information sharing to facilitate knowledge transfer and enhance community-led initiatives.
 - Sensitize discussions on race-based data, ensuring that data collection and analysis are ethically and culturally sensitive.
- Diversity in Research and Strategic Research Program:
 - Encourage diverse viewpoints in research by removing structural barriers and promoting fund equity.
 - Develop a strategic research program raising awareness of unconscious bias, emphasizing the need for ongoing management.
 - Cultivate a diverse frontline staff team to ensure services are not only approachable but also readily accessible to a wide range of individuals.
- Community Engagement and Language Use:
 - Increase community engagement for inclusive research, ensuring that research initiatives reflect the cultural nuances of the communities involved.
 - Assist in language use for a more diverse research environment, recognizing the importance of linguistic inclusivity.

Fostering Collaboration in Research

- Silos Breaking and Mentorship Programs:
 - Break down silos and foster collaboration across organizations, institutions, and communities for a more unified approach.
- Early-Career Support and Networking Strength:
 - Implement mentorship programs for early-career South Asian researchers, providing guidance and support for professional development.
 - Strengthen networking by creating partnerships with community organizations, leaders, and stakeholders, ensuring a collaborative approach.
- Learning from Experiences and Information Utilization:
 - Learn from past students' experiences, utilizing insights to inform and improve current initiatives.
 - Utilize information from agencies, workshops, and networking to enhance knowledge and collaboration among diverse stakeholders.

Holistic Approach to Systemic Barriers

- Comprehensive Systemic Barrier Overcoming:

- Adopt a holistic approach to overcome systemic barriers comprehensively.
- Address the interconnected factors and consider the broader context of social, economic, and cultural influences on health issues within the South Asian community.
- Integrated Research Initiatives and Community Integration Goals:
 - Encourage collaborative research initiatives that bring together researchers, healthcare professionals, and community members.
 - Aim for the integration of the South Asian community with other communities.
 - Example: Engage in activities like neighborhood walks to observe and discuss differences between their home countries and Canada, sparking meaningful discussions.

Advocating for Government Involvement and Policies

- Addressing Disparities:
 - Advocate for increased government involvement and ensuring alignment between private and public sectors is key.
 - Critically examine decisions that contribute to disparities, as witnessed during the pandemic (e.g., why certain businesses such as LCBO remained open while essential services like shelters faced reductions).
- Advocacy for Diversity and Inclusion:
 - Advocate for policies promoting diversity and inclusion in research and funding.
 - Push for transparent and equitable processes in grant allocation, hiring, and promotions, specifically addressing the needs of South Asian researchers.
- Bridging the Gap Between Donors and Agencies:
 - Recognize the gap between donors and agencies and the need to bridge it.
 - Explore collaborative opportunities with community organizations like temples, churches, and mosques.
- Holding Politicians Accountable:
 - Emphasize the importance of holding politicians accountable for health equity policies.

Challenges in Establishing Initiatives and Funding Sustainability

- Misalignment in Strategies and Accountability:
 - Identify misalignments in strategies and accountability for donor agencies.
 - Ensure that strategies align with the goals of the organizations and accountability measures are in place.
- Resource Availability and Toppling Barriers:
 - Recognize the availability of resources to address barriers.
 - Emphasize the need to effectively utilize available resources to overcome current challenges.
- Time Constraints and Trust Building:
 - Address time constraints associated with late short-term funding.
 - Acknowledge the time required to build trust within the community for sustained impact.

- Capitalist Dynamics in Funding:
 - Recognize capitalist dynamics in funding allocation.
 - Highlight the challenge where big organizations receive a majority of funding, leaving smaller organizations with limited resources.
- Organizational Limits and Coexistence:
 - Understand organizational limits and set realistic expectations.
 - Emphasize the potential for coexistence, recognizing that there is enough space for diverse organizations to thrive.
- Effective Utilization of Funding:
 - Emphasize that funding availability is not the sole solution.
 - Advocate for strategic and inclusive approaches in research funding.
 - Promote diversification of research funding sources to ensure a more inclusive and equitable distribution.

3. *Can you share success stories or examples of organizations or individuals that have successfully addressed systemic barriers and created more equitable opportunities for racialized experts in the field of South Asian health research and funding?*

Success Stories in Narration and Research Objectives

- Women's Exchange at Women's College
 - Narration: The Women's Exchange at Women's College stands out as a significant success story.
 - Research Objectives: The sharing of personal narratives and research objectives has effectively dismantled systemic barriers.
 - Impact: This approach not only facilitated meaningful research but also contributed to fostering inclusivity within South Asian health.
- Punjabi Community Health Services (PCHS)'s Collaboration with Centre for Addiction and Mental Health (CAMH) for Culturally Adapted Cognitive Behavioral Therapy (CaCBT):
 - Narration: PCHS achieved success through a two-year collaboration with CAMH.
 - Research Objectives: The transformation of CBT into a culturally adapted version for South Asian communities.
 - Impact: The resulting CaCBT manual has significantly supported the mental health needs of diverse communities.
- 'Invited and Forgotten' Study by PCHS in Collaboration with CASSA
 - Narration: PCHS was involved in the 'Invited and Forgotten' study.
 - Research Objectives: Highlighted systemic barriers faced by international students, opening avenues for scaling solutions.
 - Impact: Identified challenges faced by international students beyond the organization's focus area.
- CCM Diversity's Study on South Asian Women in the Job Market
 - Narration: CCM Diversity conducted a study on the on-job experiences of South Asian women.

- Research Objectives: Explored barriers faced in entering the job market, focusing on family-level and systemic obstacles.
- Impact: Emphasized the importance of addressing challenges faced by South Asian women in employment.
- VHA Home Health Care's Discrimination Addressed by Student Placement
 - Narration: A student completed placement at VHA Home Health Care.
 - Research Objectives: Address discrimination faced by personal care workers and provide training for improved English language skills.
 - Impact: Aims to improve working conditions for personal care workers.
- Rise Collaboration with Rotman:
 - Narration: Rise, a grassroots organization exemplifies the pivotal role of collaboration with larger entities.
 - Research Objectives: Dedicated to empowering people with mental health and addiction challenges to achieve greater social and economic inclusion through entrepreneurship.
 - Impact: Partnering with Rotman was instrumental, boosting credibility, trust, and facilitating more impactful communication and outreach—especially among women.
- Equity Efforts by Toronto District School Board (TDSB) and York District School Board (YRDSB):
 - Narration: TDSB and YRDSB proactively sought outreach support from Naseeha Mental Health.
 - Research Objectives: To address and discuss issues related to the Palestinian cause.
 - Impact: This collaboration aimed to foster understanding and dialogue regarding Palestinian issues within the educational context, contributing to a more inclusive and informed community perspective.
- Embrave Agency to End Violence:
 - Narration: Embrave Agency to End Violence stands as a beacon of hope for those facing violence. With a dedicated focus on women, Two-Spirit, genderqueer, trans, and non-binary individuals.
 - Research Objectives: Beyond Peel, Embrave is committed to creating a safer environment through tailored support, impacting lives with empowerment, safe shelter, legal advocacy, and community education.
 - Impact: Embrave has positively impacted countless lives, fostering healing, justice, and prevention in the face of violence through strategic partnerships and a comprehensive approach.
- Commendable Shift Towards Increased Representation:
 - Over the past decade, there has been a commendable shift towards increased representation of South Asians in research and hospitals.

BREAKOUT SESSIONS

Journey to Breaking Stigma, Building Resilience: Advancing Health Equity for Youth with Mental Health and Disabilities

Summayah Poonah, Head of Operations at [Naseeha Mental Health](#), developed a passion for special education due to her sister's diagnosis with Cerebral Palsy. She emphasized early intervention, aiming to establish strong support systems from an early age for long-term well-being. At Naseeha, she and her team have reimagined mental health practices, making them more inclusive and adapting evidence-based approaches for diverse communities.

Special needs, defined by the Ontario Government, “is related to or caused by a developmental disability or a behavioral, emotional, physical, mental or other disability.” Exceptionalities cover individuals significantly deviating from established norms, including disabilities and giftedness. Categories range from behavioral and communication to intellectual, physical, sensory, and multiple exceptionalities. There are also undefined exceptionalities, where individuals exhibit needs without a formal diagnosis, posing challenges related to stigma.

Summayah explored how special needs impact mental health, citing conditions like attention-deficit/hyperactivity disorder (ADHD), oppositional defiant disorder (ODD), depression. She noted that these mental health issues can manifest as exceptionalities, urging service providers to recognize and address related symptoms.

The discussion extended to factors contributing to a disproportionate representation of communities with learning exceptionalities, including poverty and discrimination. Root causes involve education quality, stable housing, nutrient rich balanced diets, safe neighborhoods, and regular healthcare. Racialized communities face additional barriers, including struggles with identity and exceptionalities.

Recommendations included detailing disparities, reviewing barriers, and providing examples of strategies to advance health equity. The need for more research in Canada to understand and dismantle barriers was highlighted, emphasizing the importance of addressing systemic issues to achieve equitable health outcomes.

Summayah concluded by presenting a case study illustrating discrimination based on race and disability, underscoring the urgency to address ableism and inequality in healthcare. She prompted the group to identify systemic examples and propose solutions. The group discussed the perpetuation of ableism in healthcare and shifted to mental health challenges, including waitlists, privatization, and affordability. The importance of cultural competence, community-based services, and interdisciplinary approaches is emphasized. Advocacy, deprivatization of psychotherapy, and the need for a united, holistic approach to mental health care are highlighted.

The moderator led a discussion with the attendees, delving into the following questions. Below, you'll find the captured responses from the participants:

1. *Have you personally encountered or observed instances of stigma related to mental health or disabilities among youth, and if so, how have these experiences affected individuals in your community?*

The discussion emphasizes the impact of language in destigmatizing mental health, providing a scenario to visualize the issue. The influence of unconscious bias, particularly in education, is highlighted, affecting students' choices and support systems. The discussion extended to racialized students, teachers' varying connections with students, and the need to consciously address biases. A study is mentioned, suggesting that agencies with robust policies may still exhibit racism. The role of the media in perpetuating racism is acknowledged, and the importance of incorporating education on discrimination and mental health in the curriculum is emphasized. Ultimately, the message underscores that mental health should be viewed as a health condition rather than a stigma.

2. *Can you share examples of initiatives or practices within your community or organization that have effectively promoted mental well-being and resilience among youth with mental health issues and disabilities?*

The discussion highlighted community organizations such as SOCH Mental Health and Punjabi Community Health Services (PHCS) playing a crucial role by offering comprehensive assessment, treatment, and support services. Such organizations also offered support groups, where youth with mental health issues and disabilities could share experiences, discuss challenges, and receive support in a safe and non-judgmental setting. Moreover, both schools and workplaces within our community have implemented targeted programs addressing mental health concerns. These initiatives encompass awareness campaigns, counseling services, and workshops focusing on stress management and resilience. Particularly noteworthy is the adaptability demonstrated during the pandemic, where organizations swiftly ensured the accessibility and cultural sensitivity of their programs and services. Many organizations took proactive measures, such as offering counseling services in multiple languages, providing both virtual and in-person support, and minimizing barriers to seeking help.

3. *How can we effectively educate parents and the broader community on identifying signs of mental health issues and disabilities in young people, enabling them to actively participate in early intervention and facilitating access to mental health support?*

The discussion suggested an effective approach to educating parents and the broader community about mental health issues and disabilities in young people. They recommend starting by allowing individuals to define what mental health means to them, emphasizing cultural competence. The importance of using culturally sensitive language in communication, understanding that everyone has mental health like physical health, and discouraging stigmatizing terms are highlighted. The goal is to reshape perceptions and encourage early intervention by fostering a more inclusive and understanding perspective on mental health.

Inclusion without Borders: Advancing Health Equity for International Students

Dr. Shivajan Sivapalan, the Campus Clinic Physician, and Sejal Katyal, a Research Assistant at [SAAAC Autism Centre](#), addressed the health and wellness challenges faced by the growing international student population at Durham College and Ontario Tech University. The background highlighted the significant increase in international student enrollment in Canada, emphasizing the struggles they face in covering living costs, leading to malnutrition, physical, and mental health issues. Despite their substantial contribution to Canada's economy, these students have limited access to health facilities, resulting in alarming rates of depression and suicide.

The presentation emphasized the observed gaps in health knowledge among international students, leading to common health concerns such as fatigue (26%), headaches, and mental health challenges (e.g., 14.5% diagnosed with depression). The need for improved health literacy and access to health services was underscored, with the clinic physicians noting higher incidence rates of specific conditions in this population, such as anemia (15.5%) and B12 deficiency (45%).

The literature review provided insights into the lower rates of help-seeking behavior and awareness of resources among international students compared to domestic groups. The proposed solutions included increasing access to primary care physicians, improving health literacy, and employing culturally responsive practices. The International Wellness Check (IWC) program was introduced as a solution, offering free health check-ups for international students, covering physical examinations, medical history reviews, and screenings for common issues.

The pilot study involved 202 participants, revealing a range of health issues and low awareness of immunizations among international students (100% missing at least one basic immunization). After the IWC intervention, positive changes were noted, including increased birth control usage rates (from 35% to 75%) and cervical cancer screening rates (from 25% to 80%). Mental health awareness also saw improvement, with 45% of international students knowing what to do if they needed help, increasing to 72% post-intervention. Moreover, 95% of students felt either satisfied or very satisfied with the overall IWC experience, the information handouts, the content of the teaching, feeling welcomed in the clinic, having a female nurse provide the teaching, and having a female nurse provide the pap smears. Importantly, 100% of the students would recommend the IWC.

Issues such as COVID-19, food insecurity, and clinic capacity were also discussed, highlighting challenges faced during the implementation of the IWC program. The findings emphasized the need for structured and culturally sensitive health education for international students, leading to the recommendation of a guideline of care for this population. The presentation highlighted improvements made, such as nurses being trained in pap smears and diabetes education, and provided insights into the next steps, including the continuation and expansion of the IWC program, alignment with international offices, and ongoing efforts to enhance health promotion and education for international students.

After the presentation, attendees posed the following question to the speakers:

1. Are the services provided by IWC reaching all Universities?

Currently, IWC is focused on collaborating with Durham College, but there is a broader effort to extend services to all universities. Additionally, SOCH Mental Health, another organization, addresses mental health, unwanted pregnancies, and provides frustration-free resources for international students. SOCH is actively involved in combating gender-based violence.

2. What is the reason for the gap in health awareness between local and international students?

The gap may stem from attitudes in students' home countries or a lack of knowledge. Dr. Shivajan proposed implementing immigration policies to create health awareness even before students arrive in the country.

3. How is the issue of long waiting times for students to visit doctors addressed?

IWC aims to support international students during extended waiting periods by offering a welcome environment for students to address any concerns. Initial screenings are conducted whenever students need assistance.

4. Have other colleges expressed interest in implementing similar services?

Currently, Durham College is the sole institution involved, but other universities have shown interest. A representative from University of Toronto expressed immediate interest in establishing a comparable service on their campus.

5. How can international students navigate insurance procedures with walk-in clinics?

Walk-in clinics may suggest to international students which clinics or doctors can accommodate patients without lengthy procedures, helping to streamline the reimbursement process with insurance providers.

6. Are high school international students included in the program?

The program currently focuses on college and university students and does not extend to high school international students.

7. Many students are anxious about their current situation. Were they carrying this anxiety from their home country?

Students face various challenges, including landlord abuse, inability to cook traditional foods, and working long hours at low rates to cover rising living costs. Often, students arrive with misconceptions about easily covering tuition fees through work after studies, leading to heightened anxiety when they encounter unexpected challenges.

The moderator led a discussion with the attendees, delving into the following questions. Below, you'll find the captured responses from the participants:

1. *What role should healthcare providers, policymakers, and international student associations play in collaborating to ensure that international students have equitable access to healthcare and support services, especially when they are on a visa?*

Healthcare providers should undergo training to address the diverse cultural and health needs of international students, while language barriers can be effectively managed through interpretation services, translated materials, or multilingual staff. Comprehensive education on the Canadian healthcare system, including service availability, insurance requirements, and access procedures, should be provided to international students. Advocacy efforts should unite policymakers and healthcare providers to champion the specific needs of international students, emphasizing equal access to healthcare and support services. Additionally, orientation programs are essential for educating incoming international students about the intricacies of the Canadian healthcare system, available support services, and the importance of health insurance. Collaboration and information-sharing among stakeholders can address emerging issues, and establishing feedback mechanisms will gather input from international students, ensuring continuous improvement and alignment with evolving needs.

2. *How can educational institutions better support the health and well-being of international students by addressing the cultural and language barriers they often face in accessing healthcare services?*

Firstly, healthcare staff should undergo cultural competency training, fostering a deeper understanding of diverse cultural backgrounds, practices, and beliefs. Continuous professional development should be provided to ensure ongoing sensitivity and responsiveness to the unique needs of international students. Healthcare facilities should have multilingual staff or interpreters available, facilitating communication in students' native languages. Additionally, the provision of translated materials, such as brochures and signage, aids international students in navigating healthcare services. Designating cultural liaison officers within the educational institution serves as a valuable bridge, helping students understand cultural nuances, navigate healthcare processes, and receive additional support. Creating a welcoming and inclusive environment within healthcare facilities is essential to make international students feel comfortable seeking care, and staff should be trained to be attentive to the diverse needs and backgrounds of this student population.

Beyond the Streets: Advancing Health Equity for Youth Experiencing Homelessness

Dr. Naomi Thulien, Investigator at the [MAP Centre for Urban Health Solutions](#), emphasized the need for a more upstream approach to address the distinct challenges of adult and youth homelessness. She pointed out that child protection services often fail more than the housing system itself. The findings of the 2019 National Youth Homelessness Survey in Canada revealed that a significant number of youth do not receive help in planning for their future after leaving care, and only a small percentage are aware of their risk of homelessness being assessed before transitioning from care.

To tackle youth homelessness, Dr. Thulien suggested the establishment of a minister of youth homelessness, highlighting the misconception that it is solely represented by individuals on the streets with cardboard signs. The background on youth homelessness in Canada highlighted concerning statistics, underscoring the profound challenges faced by this vulnerable population. Annually, 35,000 to 40,000 youth experience homelessness at some point during the year, with 6,000 to 7,000 on any given night. Disturbingly, 'The Second National Canadian Homeless Youth Survey' showed high mental health distress (74%), suicide attempts (35%), problematic substance use (35%), and hospitalization for overdose (33%).

Equity-focused research shows that many young people experience homelessness multiple times, with 24.1% reporting being homeless only once, while 74.9% have experienced multiple episodes. The effectiveness of interventions remains unclear, as highlighted by a systematic review indicating a lack of rigorous evaluative evidence for many program models relied upon by communities and governments.

Dr. Thulien introduced the Transitioning Youth Out of Homelessness (TYOH) 1.0 study, emphasizing that youth homelessness is a complex issue requiring targeted solutions. Participants in the study expressed the challenges of transitioning out of homelessness, with some feeling trapped even after obtaining housing.

Rent subsidies, while a short-term solution, may oversimplify the issue, and a broader focus on upstream determinants like socioeconomic position and social capital is crucial. Common reasons for youth homelessness include family instability, abuse, neglect, aging out of the foster care system, and LGBTQ+ discrimination.

The next steps, TYOH 2.0, involve initiatives like Covenant House Toronto, which offers immediate and long-term support for youth experiencing homelessness and survivors of trafficking. This includes access to 24/7 crisis shelter, transitional housing, and mentorship programs. Dr. Thulien emphasized the importance of natural mentors and introduced a leadership guide for youth in transition called "Finding Home."

The section on prevention highlighted the significance of tackling inequalities, with adverse childhood experiences (ACEs) playing a role in homelessness. The 2018 Point-in-Time (PiT) Count survey revealed that half of all respondents first experienced homelessness under the age of 25. ACEs statistics

indicated that participants with four or more ACEs experience a four to 12-fold increase in negative adult health outcomes. Examples of ACEs include various forms of abuse, neglect, household challenges, and other adversities that shape individuals' lives and contribute to their vulnerability to homelessness.

The conceptual framework of social determinants of health underscores the structural, socioeconomic, and intermediary factors contributing to health inequities. Ultimately, Dr. Thulien advocated for a holistic approach that addresses both the immediate needs of homeless youth and the broader social determinants that perpetuate homelessness.

After the presentation, attendees posed the following question to the speakers:

1. What has been the difference between South Asian, Indigenous, and Black homelessness?

The distinctions among homelessness experienced by South Asian, Indigenous, and Black individuals are multifaceted, intertwined with issues of stigma, racism, and historical injustices. Particularly concerning South Asian youth, the trajectory into homelessness can be swift, especially for those identifying as 2SLGBTQ+. In many instances, these young individuals find themselves ousted from their homes with alarming immediacy, transitioning from having a home one day to being without shelter the next.

2. What strategies can be used to prevent youth from becoming homeless a second time?

To prevent youth from relapsing into homelessness, a strategic approach involves the establishment of a dedicated Minister of Youth, tasked with addressing the intricate web of issues contributing to homelessness. This contrasts with the current practice of dispersing responsibilities across various departments like housing and education, where these critical concerns may not receive the prioritization they urgently demand.

3. What are some organizations that homeless youth can be referred to?

For homeless youth seeking support, organizations like Covenant House Toronto play a pivotal role in offering assistance. However, a significant challenge lies in ensuring that young people actively seek and access such support. As a proactive measure, the shelter system should focus on equipping homeless youth with the resources and opportunities needed to secure employment, thereby breaking the cycle of homelessness and fostering sustainable independence.

The moderator led a discussion with the attendees, delving into the following questions. Below, you'll find the captured responses from the participants:

1. How can we address the unique challenges faced by youth experiencing homelessness in accessing healthcare services, and what innovative approaches or partnerships can help bridge this gap?

To address the healthcare challenges of youth experiencing homelessness, deploy mobile clinics for basic services and implement outreach programs led by healthcare professionals. Provide cultural

competence training for healthcare providers and establish peer support initiatives. Utilize telehealth services including video calls, phone calls, messaging apps, and secure online platforms to overcome geographical barriers and offer mental health support.

- 2. In what ways can we engage local communities, organizations, and policymakers in collaborative efforts to address the root causes of youth homelessness and reduce health disparities among this marginalized population?*

In collaborative efforts, form multi-sector partnerships involving government agencies, non-profits, educational institutions, and healthcare providers. Develop education and employment programs in partnership with businesses, advocate for Housing First initiatives, incorporate child protection measures, and engage policymakers for policy changes. Conduct community awareness campaigns, involve homeless youth in program development, and collaborate with researchers for data-driven interventions. Sustainable efforts, community engagement, and tailored solutions are essential for reducing youth homelessness and health disparities.

- 3. What are some successful initiatives or programs in Toronto that provide comprehensive support, including housing assistance, job opportunities, and mental health support, to youth experiencing homelessness, and how can we replicate or scale these efforts in different communities?*

No specific initiative or program came to mind for attendees, as they don't fall within the targeted demographic or frequently enter discussions. However, one attendee emphasized that addressing youth homelessness effectively requires a holistic approach, encompassing housing, job training, and mental health services. The importance lies in establishing integrated organizations, forging partnerships with local stakeholders, and customizing programs to address the unique needs of each community. Ongoing collaboration and adaptability are paramount for achieving success in comprehensively tackling youth homelessness.

FEEDBACK FROM ATTENDEES

Here, we highlight some of the feedback from attendees who responded to a post-summit survey.

On a scale of 1-5, how would you rate the overall organization and delivery of the Summit?

1. Did Not Meet Expectations
2. Needs Improvement
3. Meets Expectations **(3%)**
4. Exceeds Expectations **(39.4%)**
5. Outstanding **(57.6%)**

On a scale of 1-5, how would you rate the keynote session on "Youth as Catalysts for Change: Amplifying South Asian Voices in Health Equity"?

6. Did Not Meet Expectations
7. Needs Improvement
8. Meets Expectations **(2%)**
9. Exceeds Expectations **(37%)**
10. Outstanding **(61%)**

Which breakout session did you attend?

1. "Journey to Breaking Stigma, Building Resilience: Advancing Health Equity for Youth with Mental Health and Disabilities" **(36%)**
2. "Inclusion without Borders: Advancing Health Equity for International Students" **(33%)**
3. "Beyond the Streets: Advancing Health Equity for Youth Experiencing Homelessness" **(21%)**
4. N/A **(10%)**

On a scale of 1-5, how would you rate the breakout session you attended?

1. Did Not Meet Expectations
2. Needs Improvement **(3%)**
3. Meets Expectations **(6.3%)**
4. Exceeds Expectations **(21.9%)**
5. Outstanding **(68.8%)**

On a scale of 1-5, how would you rate the plenary session on "Cultivating Youth Leadership: Empowering South Asian Youth for Health Equity Advocacy"?

1. Did Not Meet Expectations
2. Needs Improvement
3. Meets Expectations **(9.4%)**
4. Exceeds Expectations **(40.6%)**
5. Outstanding **(50%)**

ANNUAL HEALTH EQUITY SUMMIT

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Are you likely to participate in one of our events in the future?

1. Yes **(97%)**
2. No **(3%)**