Community Based Participatory Research (CBPR) is research conducted by, for and with communities on issues that are relevant to the communities and with the goal of bringing positive social change in the community.

It is a research approach that enables community members to participate not as “research subjects” but as research collaborators and agents of change. In CBR, research is not an end to itself but rather a means to empower communities through the participatory research process and to bring about positive social change through mobilizing evidence-based action/advocacy.

Our mission is to establish Access Alliance as the Centre for Excellence in Community-Based Research on Newcomer Urban Health. We are committed to increasing knowledge and enabling action for addressing social determinants of health that affect newcomer and racialized groups. We strive to be a leader in innovating and promoting community based participatory research dedicated to empowering newcomers and racialized communities to be active partners in research and to become agents of change for promoting health equity.

Notably, we do research from an anti-oppressive, anti-racist perspective. We also work on increasing the capacity of community organizations, academics and other stakeholders to work collaboratively with community members on community-based research projects.

Nelson Cabral, Board Chair
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1. Overview
2. Projects
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4. Peer Researchers
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Overview

The key mission of Access Alliance’s research department is to conduct research (using participatory, community-based methods) geared at generating knowledge and advocacy for overcoming health disparities faced by newcomer and racialized groups in Canada.

During the past year (April 2008 to March 2009), the research department expanded further in terms of quantity and quality, developed many institutional policies and capacity, and achieved many important milestones. We initiated 6 new projects in the last year; thus, we currently have 15 projects, 11 of which are research projects. In 2008, Access Alliance created 3 more full-time permanent staff positions for the research department (bringing the number of permanent research staff to 4). In addition, we have 4 full-time project staff and 7 consultants and part-time contract staff. We also hosted and supervised 13 students (6 graduate students and 7 undergraduate students).

During the past year, we further strengthened our capacity to do research using community-based, participatory methods. In fact, we are now considered a leader in community-based research; many community agencies and academics look to us for resources and trainings on topics related to community-based research. In the past year, we engaged 39 “peer researchers” (members of the community about whom the research is being conducted) in designing and conducting research, providing them with hundreds of hours of training/mentoring and other support along the way. We delivered 154 hours of trainings to 422 participants. Over 95% of participants rank these trainings as “very useful” or “useful.” Our commitment to partnership and collaborative approach is reflected in the number and quality of our partnerships; we currently have 14 academic partners and 22 community agency partners. We have also developed dozens of tools that enhance collaborative process in research and make research more accessible to non-academic partners. Together with other members of the Toronto Community Based Research Network, we produced a video called “Peer Research 101” that introduces people to the benefits and processes of doing peer research-based research.

In the last year, we made major progress in terms of data collection. We conducted 14 focus groups and 40 interviews. We also conducted five surveys: Peel LGBTTQ youth survey, Healthy Immigrant Effect Survey, Environmental Scan of Models of Care for Government Assisted Refugees, Newcomer Youth Mental Health Questionnaire, Income Security, Race and Health Questionnaire. Thus, we currently hold a large volume of high-quality research data. In the upcoming year, we will be analyzing this rich set of research data to generate publications, knowledge exchange tools, and advocacy strategies that contribute to overcoming health disparities faced by newcomer and racialized groups.

We also developed new tools and processes for promoting evidence-based service planning within Access Alliance. For example, we updated the format of the Access Alliance semi-annual activity report to make it a more useful resource for monitoring changing client demographics, programs and service delivery.
We also supported staff members in implementing program evaluations and in using research and client data to improve the accessibility and quality of our services.

This past year was a very busy one for dissemination and knowledge exchange activities as well. We gave 16 conference presentations and 5 invited lectures/workshops, participated in 2 invited panels, and organized 2 photovoice exhibits and 2 meetings of the Toronto Refugee Health Network (recently renamed the Ontario Refugee Health Network). Additionally, we produced 6 reports, 25 maps, 14 research training modules, and dozens of community-based research tools.

The coming year will be particularly busy in terms of data analysis, writing, knowledge exchange and advocacy activities. We will be building our data analysis and dissemination capacity so as to ensure that (1) our analysis and publications are of the highest rigor; and (2) that no research data goes to waste. We are committed to making sure that all of our research findings contribute to improving services and policies on newcomer health.

2008 to 2009 Research Department Highlights

• Initiated 6 new projects
• Secured $300,000 in research grants
• Engaged 39 “peer researchers”
• Supervised 13 students
• Delivered 154 hours of training to 422 participants
• Conducted 14 focus groups, 40 interviews and 5 surveys
• Presented in 16 conferences, 5 invited workshops, 2 invited panels
• Organized 2 exhibits and 2 networking meetings
• Developed many community based research and evaluation tools

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Current Projects

We currently have 15 projects, 11 of which are research projects. Many of our research projects are in data collection phase and are scheduled to be completed by December 2009. Our projects fall under three research agendas:

A. Racialized Groups and Health Status
B. Social Determinants of Newcomer Health
C. Neighbourhood and Health

In the past year, we launched 6 new projects:

• Refugee Youth Health project
• Migration and Diabetes project
• Best Practices in Models of Care for Government Assisted Refugees
• Healthy Immigrant Effect Survey
• Pediatric Health and Development within Immigrant and Refugee Families
• Cervical Cancer Screening at Access Alliance: Assessing Risk and Improving Access (chart review).

Projects that were active or initiated in the past year are listed on the next page:
**A. RACIALIZED GROUPS AND HEALTH STATUS AGENDA**

<table>
<thead>
<tr>
<th>NAME OF PROJECT</th>
<th>KEY GOAL</th>
<th>FUNDED BY</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Income Security, Race and Health project</td>
<td>Investigates challenges and discriminations that people of colour face in the labour market</td>
<td>Metcalf Foundation and Wellesley Institute</td>
</tr>
<tr>
<td>2. Exposed Photovoice project</td>
<td>Use photovoice to investigate the impact of poverty in Black Creek</td>
<td>Toronto Arts Council, Ontario Arts Council, Metcalf Foundation and Wellesley Institute</td>
</tr>
<tr>
<td>3. Differential Quality of Care</td>
<td>Investigates disparities in quality of healthcare received by people of colour</td>
<td>Access Alliance</td>
</tr>
</tbody>
</table>

**B. SOCIAL DETERMINANTS OF NEWCOMER HEALTH AGENDA**

<table>
<thead>
<tr>
<th>NAME OF PROJECT</th>
<th>KEY GOAL</th>
<th>FUNDED BY</th>
</tr>
</thead>
<tbody>
<tr>
<td>4. Exploring Mental Health of Government Assisted Refugees (GARs)</td>
<td>Exploratory research to investigate key mental health issues faced by Government Assisted Refugees and how GARs understand and respond to these issues</td>
<td>Centre for Addiction and Mental Health</td>
</tr>
<tr>
<td>5. Mental Health Services for Newcomer Youth: Exploring the Needs and Enhancing Access (in partnership with Dr. Nazilla Khanlou)</td>
<td>Investigates mental health issues faced by newcomer youth and the barriers they face in accessing mental health services</td>
<td>Children's Hospital of Eastern Ontario</td>
</tr>
<tr>
<td>6. Refugee Youth Health Project: Component 1</td>
<td>Investigates changes in roles and responsibilities for refugee youth after coming to Canada</td>
<td>Laidlaw Foundation and ISAP</td>
</tr>
<tr>
<td>7. Refugee Youth health Project: Component 2</td>
<td>Using digital storytelling investigates educational challenges and barriers that refugee youth face in Canada</td>
<td>Laidlaw Foundation and ISAP</td>
</tr>
<tr>
<td>8. Migration and Diabetes project</td>
<td>Investigates risks and determinants of diabetes that immigrants face in Canada</td>
<td>Public Health Agency of Canada</td>
</tr>
<tr>
<td>10. Healthy Immigrant Effect Survey</td>
<td>Investigates health trajectory of clients at Access Alliance (particularly refugees)</td>
<td>Access Alliance</td>
</tr>
<tr>
<td>11. Pediatric Health and Development within Immigrant and Refugee Families (retrospective chart review)</td>
<td>Investigates health of immigrant and refugee children</td>
<td>Access Alliance</td>
</tr>
<tr>
<td>13. Peel LGBITTQ Youth Needs Assessment Survey</td>
<td>Investigate service needs and gaps faced by LGBITTQ youth in Peel region</td>
<td>Associated Youth Services of Peel</td>
</tr>
<tr>
<td>14. Initial Health Assessment of New Immigrants and Refugees (retrospective chart review)</td>
<td>Investigates key medical issues faced by new immigrants and refugees to improve initial screening protocol</td>
<td>Access Alliance</td>
</tr>
</tbody>
</table>

**C. NEIGHBOURHOOD AND HEALTH AGENDA**

<table>
<thead>
<tr>
<th>NAME OF PROJECT</th>
<th>KEY GOAL</th>
<th>FUNDED BY</th>
</tr>
</thead>
<tbody>
<tr>
<td>15. Building Community Mapping Capacity</td>
<td>Building GIS mapping capacity among community health centres to promote use of maps in improving services for marginalized communities</td>
<td>Centre for Urban Health Initiatives (CUHI) and Ryerson University</td>
</tr>
</tbody>
</table>
Promoting Community Based Research: Training & Tools

Last year, we delivered 154 hours of training for a total of 422 participants. We have developed 19 training modules related to research, collaborative process, and facilitation. This included introductory level trainings on CBR and evaluation, co-learning sessions on immigrant and refugee health issues, as well as hands-on training on recruitment, research ethics, and how to conduct focus groups and interviews.

Over 95% of participants rank trainings as “very useful” or “useful.” As part of the Refugee Youth Health project, we have made our research training curriculum more youth-friendly and accessible. Further, we have developed many tools that enhance collaborative, participatory process in research including our own model of collaborative research design (CRD), photovoice tools (e.g., Investigative Photography, Social Change Photography), Body Mapping exercise, and Action Headlines exercise. Some of the training module and tools that we developed are listed below:

**Introductory Trainings**
- Introduction to Community Based Research
- Introduction to Participatory Evaluation
- Introduction to Research Ethics
- Introduction to Digital Storytelling
- Introduction to Photovoice

**Hands-On Trainings**
- How to Conduct Focus Groups
- How to Conduct Interviews
- How to do Collaborative Research Design
- How to Conduct a Literature Review
- How to Conduct an Environmental Scan
- How to Develop a Dissemination Strategy
- Facts for Social Change (How to Work With Census Data)
- Facilitation Approaches
- Approaches to Advocacy

**Co-Learning Sessions**
- Anti-Oppression
- Social Determinants of Mental Health
- Refugee Youth Health Issues
- Historical Timeline
Peer Researchers

In the last year, we trained and engaged 39 community members (newcomer and people of racialized backgrounds) as “peer researchers” in our projects. Many of the peer researchers are actively involved from the planning and design phase of the project through to dissemination and follow up.

For example, the peer researchers from our Refugee Youth Health project co-led the selection of the research question and development of the research methodology. Similarly, the peer researchers from the Income Security, Race and Health are taking the lead role in conducting the focus groups for the project. We provided hundreds of hours of training and mentoring to the peer researchers to enable them to perform their expected role as co-researchers in the projects. There is plenty of evidence that their involvement and input has contributed significantly in improving the quality of our research design, research process as well as the research findings. Evaluation and ongoing feedback suggest that our peer researchers receive multiple benefits and learnings from being involved in our projects. The names of our peer researchers are listed below:

Income Security, Race and Health
Amina (Safy) Abouzaid
Kenza Belaid
Felix Cabrera
Tha Dar Hsae
Celena Knight
Darren Pham
Carina Reider
Zahoorunnisa

Exploring Mental Health of Government Assisted Refugees
Naza Abdalazeez
Sayed Maqsud Burham
Sheila Htoo
Paw Wah

Refugee Youth Health
Arzo Akbari
Sheila Htoo
Azza Khogali
Stella Abiyo Mona
William Mude

Exposed Photovoice (Photoresearchers)
Mohamed Abdelrahim
Amina (Safy) Abouzaid
Samira Ahmed
Brian Durson

Anthony Harvey
Celena Knight
Dorigen Appiah-Kubi
Say Less
Ann-Marie Chow
Ann Moses
Stanley Muddah
Sha Me Ri
Htay Win
Rui Zhao

Newcomer Youth Mental Health
Jessie Gnaneswaran
Jalajah Jokarasia
Laila Kazemi
Lorenzo Vargas Mantilla
Eiman Nabag
Adriana Pazos
Wajma Soroor

Best Practices in Models of Care for Government Assisted Refugees
Edriss Haidari
Mukhtar Abdi Ige
Thay Su Lah
Freddy Rolando Mojica
Nazar Oshar

Migration and Diabetes Project

Access Alliance has been funded by Public Health Agency of Canada to conduct the Toronto component of the International Collaborative Study on Migration and Diabetes. The research will investigate the relationship between migration and diabetes by assessing experiences with diabetes, and behaviours and socio-economic conditions affecting its risk, prevention, treatment and management among migrants and non-migrants; it will also examine the roles of the healthcare system, as perceived and practiced by healthcare personnel working with immigrants. The Toronto component will conduct this research among 4 immigrant communities (Mandarin-speaking immigrants from China, Tamil-speaking immigrants from Sri Lanka, Urdu-speaking immigrants from Pakistan, and Bengali speaking immigrants from Bangladesh), a comparison sample of non-immigrants, as well as diabetes health care providers. These 4 immigrant groups were chosen for several reasons: they experience a high risk of developing diabetes post-migration; they are large and growing communities in Toronto; they experience major social, economic and linguistic barriers to care; and the project team has excellent working relationships with these communities thus ensuring the project’s success in planning, outreach, recruitment and sharing of the results.

Dr. Ilene Hyman and Dianne Patychuk are jointly leading this project on behalf of Access Alliance. They will be supported by four staff (one from each of the four immigrant community): Qamar Zaidi, Sivajini Sivaswamy, Khaleda Yasmin, and Yun Zhang. We have developed strong partnerships with several diabetes education programs and community health centres across Toronto.

Data will be collected using the Computer Assisted Personal Interview (CAPI) methodology. All research staff have been trained to use CAPI. The data collection is scheduled to be completed by early July 2009. Findings from this study will be shared with the researchers and health care and community agencies using a variety of formats (e.g. journal publications, presentations at scientific conferences, workshops).

For more information please visit www.researchforchange.ca

www.researchforchange.ca
Income Security, Race and Health Research Working Group

Canadian census data and other studies highlight that, compared to people from European backgrounds, “people of colour” are facing higher levels of unemployment and poverty, are more likely to be concentrated in low-paying, unstable jobs, and are more likely to be living in low-income neighbourhoods with sub-standard housing and inadequate services. The Income Security, Race and Health (ISRH) research working group was established in 2006 under the leadership of Access Alliance to investigate why racialized groups in Toronto are facing these employment and income inequalities, and to assess the health impacts of these inequalities.

The project is based in Black Creek neighbourhood. In 2008 we spent many months building partnerships within Black Creek community and providing research training to several Black Creek residents (who are currently working as peer researchers for the project). In the fall of 2008, we successfully implemented the “Exposed” photovoice project in which we trained 14 residents of Black Creek in using the arts-based research tool called photovoice to investigate the impacts living in low-income neighbourhood. The photo-researchers took hundreds of photos and wrote reflective narratives. Some of these photos and narratives have been compiled to create the Exposed Photobook (available at www.researchforchange.ca).

The second task for ISRH is to investigate why people of colour are facing difficulties in getting good, stable jobs in their fields (in spite of having necessary qualifications and in spite of using multiple strategies). In the beginning of 2009, we conducted focus groups with the Arabic speaking, Hindi-Urdu speaking, Spanish speaking, Vietnamese speaking, and with the Black community. These focus groups have generated many important findings about the systemic barriers that racialized families face in the labour market and the inability of existing employment and other services to address these barriers. The final phase of the project involves conducting longitudinal ethnographic interviews with 10 families. The research is scheduled to be completed by the end of December 2009.

The ISRH research working group is made up of an interdisciplinary team of 4 academic partners, 4 community agency partners, 6 peer researchers, and Access Alliance research staff (led by Research Coordinator Ruth Wilson).

For a complete list of the team and other project details visit: www.researchforchange.ca

Partners

We believe that strong partnerships and collaborations are essential ingredients for conducting effective, high quality research. We spend a lot of time building strong formal partnerships.

All our research projects are led by multi-collaborative teams made of up academics, staff from community agencies, students and community members (peer researchers). We have 22 community agency partners and 11 academic partners. We have benefited tremendously from our partners in terms of the knowledge they bring to the project as well as other support (such as meeting space, local links, assistance with recruitment, access to research resources etc).

COMMUNITY PARTNERS

Across Boundaries
Afghan Women’s Organization (Parwana Siddiqui)
Black Creek Community Health Centre (Jackeline Barragan and Lisa Brown)
Canadian Centre for Victims of Torture (Soraya Attai and Mohammed Ahmad)
COSTI (Yasmine Dossal)
Delta Family Resource Centre (Naomi Ives)
Griffin Centre (Diane Broad)
OCASI Youth Project (Kamal Farmaly)
Regent Park Community Health Centre (Dr Alan Li)
Sabawoon Afghan Family Education
Sojourn House (Everton Gordon)
Southern Sudanese Community Organization of Ontario (David Lugeron)
Sudanese Community Organization (Amin Malik)
Thorncliffe Neighbourhood Office
Tobermory Community Activities Centre
Toronto District School Board (Amita Handa)
Toronto Public Health

Women’s Health in Women’s Hands Community Health Centre (Notisha Massaquoi)
Working Women’s Community Centre
York University Experiential Education Program
York University—TD Community Engagement Centre

ACADEMIC PARTNERS

Ranu Basu
York University
Sarah Flicker
Ryerson University
Grace-Edward Galabuzi
Ryerson University
Sepali Guruge
York University
Ilene Hyman
CERIS
Michaela Hynie
York University
Nazilla Khanlou
York University
Patricia Landolt
University of Toronto
Carles Muntaner
Centre for Addiction and Mental Health
Claus Rinner
Ryerson University
Funders

Core operations of the research department is supported through Toronto Central LHIN. We secured over $300,000 of additional project specific funding last year. Our new funders include Public Health Agency of Canada (for the Migration and Diabetes project), Immigrant Settlement and Adaptation Program (for Refugee Youth Health Project) and Centre for Urban Health Initiative (for the Building Community Mapping Capacity project).

We would like to thank our funders for recognizing our commitment to community-based, participatory process in our research and being accommodating in terms of timeline and additional resources.

Associated Youth Services of Peel
Centre for Urban Health Initiatives
Children’s Hospital of Eastern Ontario
Health Force Ontario
Immigrant Settlement and Adaptation Program B
Laidlaw Foundation
Metcalf Foundation
Public Health Agency of Canada
Toronto Central Local Health Integration Network
Wellesley Institute

Students

Students play an important role in many of our projects. The research department is committed to providing a valuable learning experience for placement students while ensuring that they are active contributors to our projects.

We hosted and supervised 12 students this past year. We have hosted students from social work immigration and settlement studies, and health studies. Student placement evaluations indicate that students learn a lot about newcomer health; and they value the hands-on experience they receive in designing and conducting community-based research.

Yannie Aass
BA in Health Studies, University of Toronto

Corinne Alstrom
Bachelors in Social Work, Ryerson University

Igor Dragovic
Bachelors in Geography, Ryerson University

Davina Balram
Bachelors in Social Work, York University

Lucia Isabel Fiestas-Navarette
BA in Health Studies, University of Toronto

Lindsey Fockler
Masters in Social Work, McMaster University

Theon Harrichand
Masters in Social Work, University of Toronto

Adriann Moss
MA in Immigration and Settlement Studies, Ryerson University

Jostina Mugwara
BA in Health Studies, University of Toronto

Goldameir Oneka
Geography, York University

Melissa Wong
Masters in Social Work, York University

Jacqueline Young
Masters in Spatial Analysis, Ryerson University
In the last year, research department staff gave 16 conference presentations including the 11th National Metropolis conference in Calgary, the Refugee and Insecure Nation conference, the ISAP conference, the CAMH conference, the CUExpo conference, and the OCASI conference. We also gave 5 invited lectures/workshops to students and service providers and participated in 2 invited panels (Settlement Without Boundaries –SWB+08 symposium and Research for Social Change symposium organized by Community Social Planning Council). We organized 2 photovoice exhibits and 2 meetings of the Toronto Refugee Health Network (currently renamed as Ontario Refugee Health Network). In the coming year, we will continue to design and deliver many workshops and presentations on newcomer/racialized health and on CBR.


The Refugee Youth Health Project

The Refugee Youth Health Project is a community-based, youth-led project initiated by Access Alliance in April 2008. This project investigates key social determinants of mental health for Afghan, Karen, and Sudanese refugee youth. The project received funding from Laidlaw Foundation and from Immigrant Settlement and Adaptation Program (ISAP 8). The project team comprises of a broad interdisciplinary team made of 4 refugee youth peer researchers, 4 academic partners and 11 community agency partners. The first phase of the project involved developing youth-friendly research training curriculum and delivering training to refugee youth peer researchers. Following this, we brought together our research team for two days of Collaborative Research Design sessions that led to the development of two core research questions for the project. The two research questions and their methodology were selected to reflect the relevance to Toronto-based Afghan, Karen, and Sudanese, refugee youth in context of their communities, aimed at improving services and public policy. Both research components place youth with refugee experience at the centre, documenting their roles, perspectives, strategies, decision-making and experiences; in both components, data collection, analysis and dissemination is led by trained youth with refugee experience.

The first component focuses on the roles played by Afghan, Karen, and Sudanese youth with refugee experience within their families and communities before and after arrival to Canada. The component uses mixed methods including a survey, language and gender-specific focus groups, and in-depth interviews. The second question focuses on how youth with refugee experience negotiate educational challenges in Canadian schools within five years of arrival; youth will investigate this question themselves by creating ‘digital stories,’ and will reflect on what they learned in follow-up interviews. Findings from this research will be disseminated through a series of workshops, roundtables, forums and refugee youth digital stories. The anticipated completion date for both components of this project is December 2009. The project is led by four refugee youth peer researchers (Arzo Akbari, Sheila Htoo, Azza Khogali, and Stella Mona Abiyo), Dr. Sepali Guruge (Ryerson University), Dr. Michaela Hynie (York University) and Rabea Murtaza and Dr. Yogendra B. Shakya from Access Alliance, in partnership with 11 other community agencies.

For a complete list of partners visit www.researchforchange.ca.

Reports & Publications

During the last year, we produced 6 publications, 2 Semi-Annual reports, 3 evaluation reports, 25 maps, and 14 research training modules. Many of our research projects are expected to complete data collection during this coming year and over the next years, we plan to produce a number of new publications based on these projects.


Team

CORE STAFF

Andrew Koch
Data Support and Evaluation Coordinator

Rabea Murtaza
Research Coordinator (Training Lead)

Yogendra B. Shakya
Director of Research

Ruth Marie Wilson
Research Coordinator (Advocacy Lead)

PROJECT STAFF

Najmus Sadiq
Project Manager
Models of Care for Government Assisted Refugees

Reza Shidfar
Best Practices Research Coordinator
Models of Care for Government Assisted Refugees

Sivajini Sivaswamy
Assistant Project Coordinator
Migration and Diabetes project

Qamar Zaidi
Project Coordinator
Migration and Diabetes

RESEARCHERS / CONSULTANTS

Matthew Adams
Research / Trainer

Gilbert Gallaher
Analyst
Differential Quality of Care project

Ilene Hyman
Consultant
Team Leader
Migration and Diabetes project

Dianne Patychuk
Consultant Epidemiologist
Team Leader
Migration and Diabetes project

RESEARCH ASSISTANTS

Tahira Gonsalves
Research Coordinator
Newcomer Youth Mental Health project

Mercy Kamau
Graduate Research Assistant
Differential Quality of Care project (till August 2008)

Khaled Aryanfar
Consultant
Healthy Immigrant Effect Survey and Pediatric Health Chart review

Chris Stamler
Project Coordinator
Initial Health Screening Chart review (till September 2008)

Khaleda Yasmin
Research Assistant
Migration and Diabetes project

Ying Zhou
Research Assistant
Migration and Diabetes project

Many Access Alliance staff are involved as advisory members in our research projects and/or have provided support for our research projects in various ways. The research team would like to thank all of you for your support.