



Health Justice Tuesdays

Health and Refugee/Immigration Law

May 14, 2019 Dr. Vanessa Redditt and Jennifer Stone



Health Justice Tuesdays – Supported by:

Legal Aid Ontario (Program Funding)
St. Michael's Family Health Team and Hospital
(In Kind Support)

AFHTO Bright Lights Award Nasmith Award (DFCM)

Organized by Education Subcommittee: Gary Bloch, Emily Hill, J. Stone, R. Shoucri











St. Michael's

Inspired Care.
Inspiring Science.

Academic Family Health Team

Presenters Dr. Vanessa Redditt Family Physician,

Dr. Vanessa Redditt Family Physician, Crossroads Refugee Clinic Women's College Hospital Jennifer Stone Onsite Lawyer, Health Justice Program







Faculty: Vanessa Redditt

Relationships with commercial interests:

- Grants/Research Support: None
- Speakers Bureau/Honoraria: None
- Consulting Fees: None
- Other: Staff physician at Women's College Hospital

Faculty: Jennie Stone

Relationships with commercial interests:

- Grants/Research Support: None
- Speakers Bureau/Honoraria: None
- Consulting Fees: None
 Other: Employee of Neighbourhood Legal Services



Disclosing Commercial Support

This program has not received financial support nor inkind support from any commercial interests

Potential for conflict(s) of interest:

• None



Mitigating Potential Bias

• Not applicable



- 1. Share a broad understanding of common migratory trajectories;
- 2. Recognize how accessing justice in immigration matters can impact health across the migratory/post-migratory trajectory;
- 3. Acquire skills in enhancing clinical documentation to support patients with immigration-related issues, and understanding appropriate referrals



30% cut to Legal Aid this year, further 10% next year Includes April 15, 2019 announcement that Province will no longer fund immigration & refugee matters

- > Feds provide approx. \$16 million
- Provincial legal aid for refugees approx. \$34 million
 = SIGNIFICANT SHORTFALL

Currently: Only 7-hour certificates for Basis of Claim forms currently funded. Medical reports no longer funded. Refugee Law Offices remain open but triaging for most vulnerable, and focusing on appeals.

Case Scenario

- · Ms. T is 38yo woman who arrived as a refugee claimant from Ethiopia eight months ago.
- · She had to leave behind her 3 children, who remain with her mother. She is awaiting her refugee hearing and has no date.
- · She lives in a small basement apartment, which she shares with 4 other women. She works at a factory and goes to English classes in the evening.
- Her sleep is disrupted by nightmares, her mood is low, and she experiences frequent flashbacks related to past trauma.



* HEALTH JUSTICE PROGRAM

Health Justice Tuesdays

1. Migration pathways 101

Migration pathways in Canada

- 1. Economic Class immigrant (Express Entry, Provincial Nominee)
- 1. Resettled Refugees Arrival in Canada
- Government Assisted or
- Privately Sponsored

- Permanent Residence can be lost for:
- · Criminality,
- · Failure to Maintain Residence,
- · Misrepresentation,
- · Cessation,
- Vacation

- 3. Permanent residence
- 5. Loss of Status

- 1. Refugee claim in Canada
- 2. Refugee/Protected Person Grant

4. Family Reunification

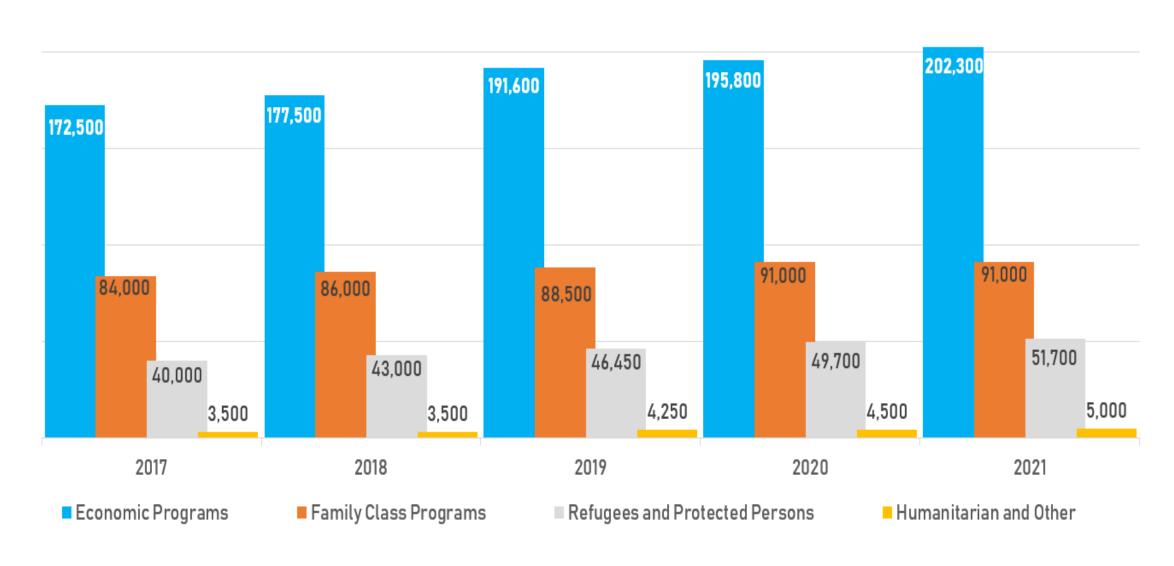
6. Citizenship

- 2. First Stage Approval for In-Canada spouse
- 2. First Stage Approval on H&C Grounds
- Family Class Sponsorship
- Refugee family reunification
- One-Year Window

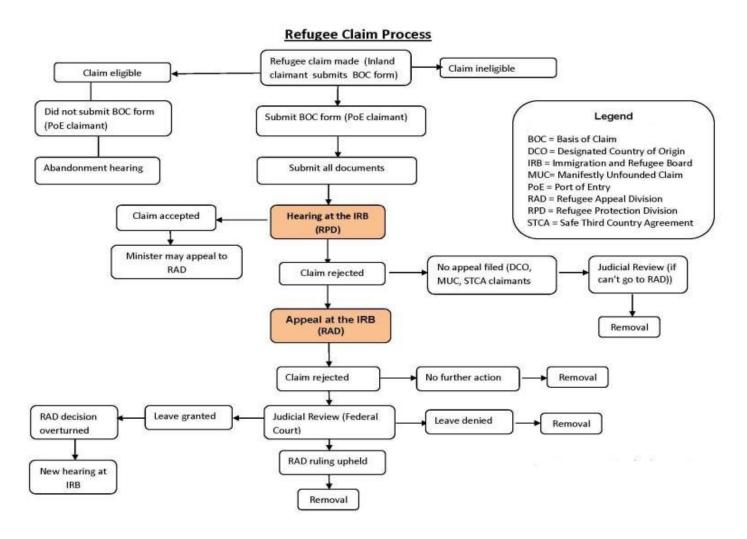
- 1. Family Class Sponsored
 - 1. Caregiver Pathways
- 1. Humanitarian & Compassionate

- Language requirement (Level 4 speaking and listening)
- Knowledge requirement (literacy, up to level 15)
- Fee

Canada Immigration Levels (2017-2021)



Refugee Claim Process Q. When to refer for legal help? A. ALWAYS

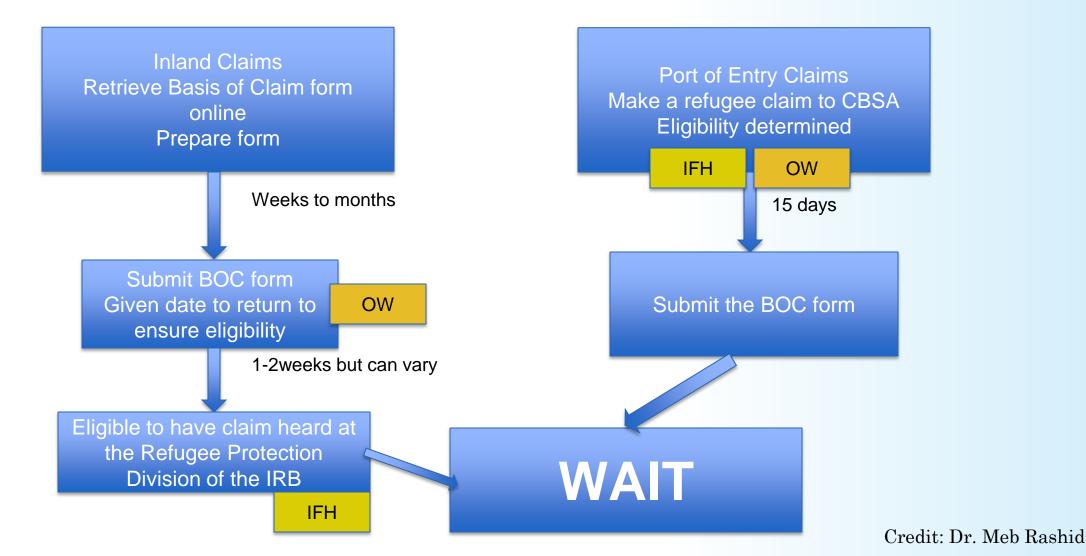


Claimants 275% more likely to be granted refugee protection when represented by a lawyer than unrepresented.

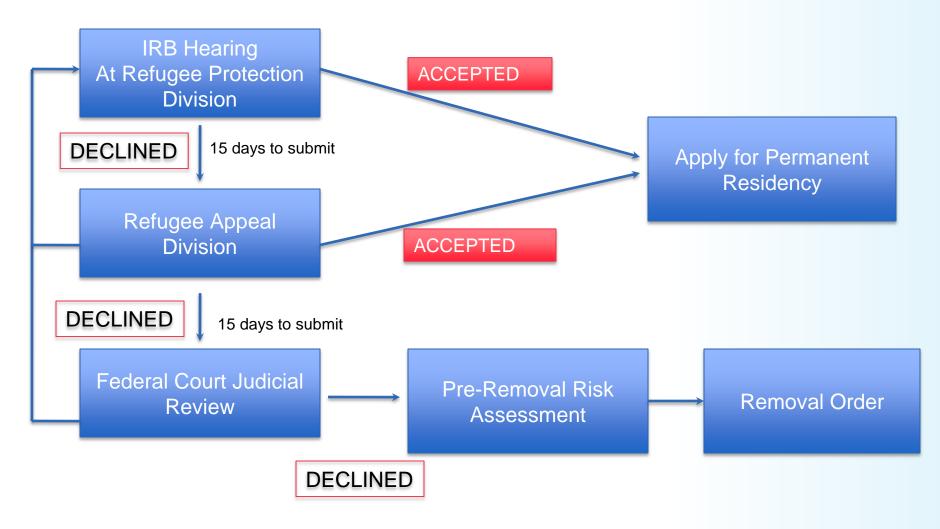
- Sean Rehaag, "The Role of Counsel in Canada's Refugee Determinations System: An Empirical Assessment", Osgoode Hall Law Journal, (2011) Vol. 49, No. 1.

https://digitalcommons.osgoode.yo rku.ca/cgi/viewcontent.cgi?referer =https://www.google.com/&httpsr edir=1&article=1073&context=ohl i

The Refugee Claim Process for healthcare providers









 Recent changes to federal legislation and legal aid access: a 101 for health care providers

May 30, 12 – 1:30 pm

Li Ka Shing, Room 240, 209 Victoria

Please RSVP to centrelist@smh.ca

Immigration/Refugee lawyer Maureen Silcoff

 Refugee/Immigration Report Writing & Addictions

June 4th, 2019, 5:30-8pm

33 Russell Street, Room 2029,
Please RSVP by registering:
https://forms.gle/EgVNLosAdPcdGhF
m7 COST: \$5 to cover snacks

Alex Caudarella, MD, Addictions Specialist and Family Physician; Shane Martinez, Criminal Defence Lawyer; Tony Navaneelan, Refugee Lawyer



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2. A2J in immigration matters impacting health across the migratory trajectory

MIGRATION AND THE SOCIAL DETERMINANTS OF HEALTH

Conditions surrounding migration often fuel health inequities and may expose migrants to increased health risks and negative health outcomes.



INDIVIDUAL FACTORS

age, sex & hereditary factors



LIFESTYLE FACTORS

economic class, cultural or linguistic barriers, substance abuse



LIVING CONDITIONS

access to clean water and sanitation, safe housing



.WORKING CONDITIONS

access to/ existence of jobs providing living wage



SOCIAL & COMMUNITY FACTORS

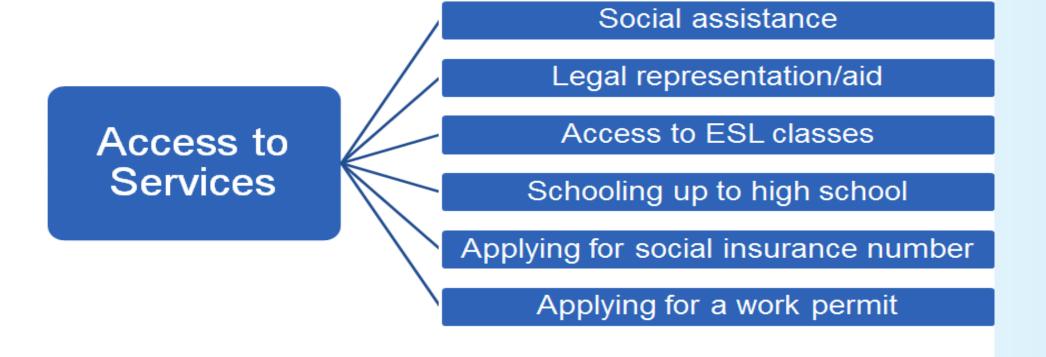
existence of discrimination, stigma, social inclusion



GOVERNANCE & SOCIOECONOMIC CONDITIONS

existence of legislation and policies affecting migrants' health







Language barriers

Legal representation/aid

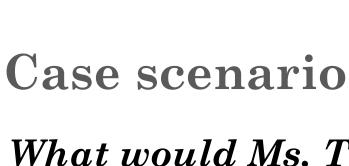
Access to ESL classes

Lack of familiarity

Schooling up to high school

Applying for social insurance number

Applying for a work permit



What would Ms. T be entitled to:

- While waiting to hear if she's eligible to make a refugee claim?
- Once eligible to claim?
- Once claim is granted?
- As permanent resident?
- As citizen?

Alternatively:

• If claim is refused?

SEE HANDOUT ON ENTITLEMENTS PER STATUS

Interim Federal Health Program (IFHP)

- Temporary health care coverage for refugees
- Basic coverage: MDs&NPs/Diagnostics/Laboratory tests (similar to OHIP coverage)
- Supplemental services
 - Medications: similar to ODB formulary
 - Emergency dental
 - Vision
 - Physical therapy, allied health, medical devices, etc
- Coverage for one year for PSRs/GARs (some exceptions) and until passed refugee hearing for claimants
- <u>https://www.medaviebc.ca/en/health-professionals/resources</u>



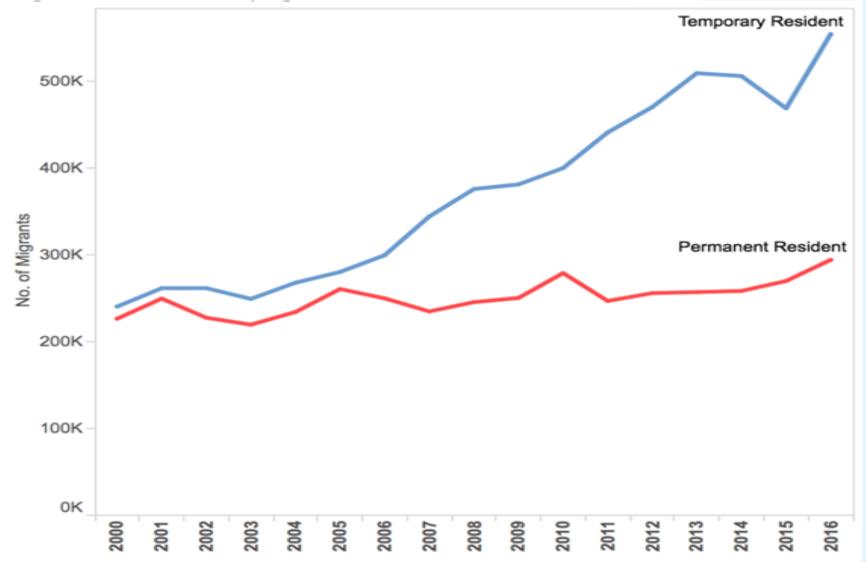
Accessing Services through IFHP

- Show Interim Federal Health Program Certificate
- Health professionals must be registered with IFHP Medavie Blue Cross



INTERIM FEDERA	L HEALTH CERTIF	ICATE OF ELIGI	BILITY
Family name:			
Given name(s):			
Date of birth:	(ppppliners/dd)		
Sex:		ucı:	
Citizenship:			
		Application	on no.:
	""NOT VALID FOR TRA		
The above named individual is	eligible for the following coverage	pe:	
Coverage:		Effective Date:	Valid Until:
This coverage may cease or be	modified without notice if the in	idividual's immigration status	changes.
This certificate must be present	ad to continue to be the		and insured wheth ID
before receiving services. If an			
individual cannot be reimburse	d. '		
I, the undersigned:			
destruction of the second	V. /		
 declare that I require coverage status, or if I become eligible for 			es to my immigration
 understand that it is my respo as required; 	nsibility to renew this coverage	before and anni	ually thereafter,
- understand that my medical is	nd personal information will be	thansd with CIC IEUP claims	administration and o
appropriate third-parties for the	administration of the IFHP and	that personal information ma	y be shared with other
government institutions and oth and Immigration Act.	er third-parties in accordance w	ith the Privacy Act and the D	epartment of Citizens
SIGNED at	OR (market)		
	ou MUST verify the eligibility of ps://provider.medavie.bluecr		
Client ID #:			
Family name:			
Given name(s): Date of birth:			
Date of Birth:	booyhean	and .	

Migration dynamics in Canada



Source: Canadian International Development Platform, 2018. https://cidpnsi.ca/migration-flows/





- Estimated 500,000 in Canada¹
- Clinics serving uninsured migrants:
 - FCJ Refugee Centre
 - Community Health Centres
 - E.g. Access Alliance: no catchment area
 - Canadian Centre for Immigrant and Refugee Health
 - Muslim Welfare Centre of Toronto
 - Toronto Public Health: sexual health, vaccines, TB
 - Planned Parenthood
 - Midwifery care

¹Magalhaes L, Carrasco C, Gastaldo D. Undocumented Migrants in Canada: A scope literature review on health, access to services, and work conditions. J Immigr Minor Health. 2010;12(1):132-151

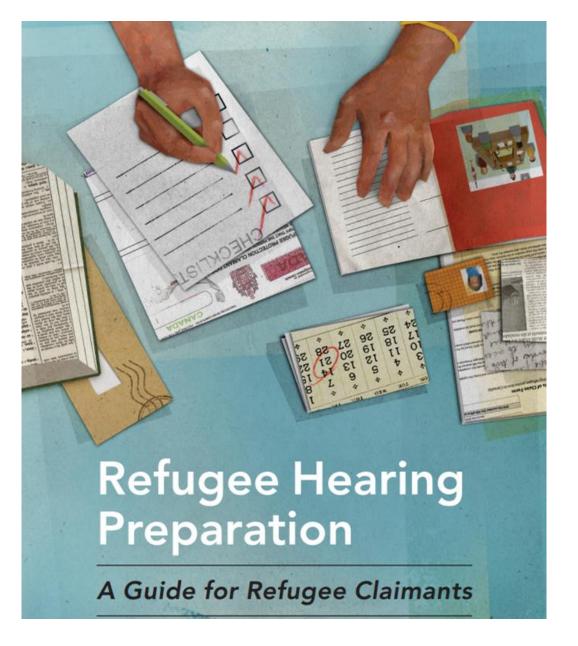


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3. Appropriate referrals and documentation for patients with immigration issues

"Get a report from a doctor or psychologist in Canada which documents your health problems"



"A letter from your doctor in Canada confirming scars or injuries"

Legal relevance of medical documentation for refugee claims and appeals

- To support a vulnerable person application at the Refugee Protection Division re need for special accommodations
- To assist decision maker in understanding barriers to giving testimony
- Viability of Internal Flight Alternative
- To identify mental health impacts of past trauma
- To document scars/injuries

General Documentation Tips

- Introduction
 - Writer's background/credentials
 - Duration of clinician-patient relationship, frequency of visits
- Description of symptoms at multiple visits
- Description of exam findings, including mental status exam
- Summary of diagnosis/findings and treatment plan
- If applicable, request for accommodations

General Documentation Tips, Cont'd

- Focus on an objective account of reported symptoms, examination findings, and treatment plans/recommendations.
- Use neutral, professional language.
- Avoid commenting on the patient's credibility.
- Avoid a lengthy summary of the patient's history.
- Avoid statements that may be perceived as advocacy for the patient.

Role of primary care

- Facilitate referrals to psychiatry, relevant medical specialists
- Practical reality: mental health care often falls within scope of primary care

http://incomesecurity.org/publications/social-assistance-general/Understanding-the-complexity-of-treatment-of-mental-illness-and-addictions-in-Ontario-w-2-headers-updated-May-2018-_2.pdf



Other Resources

Refugee and other immigration claims:

https://refugeeclaims.wordpress.com/

Refugee Claim process:

https://refugee.cleo.on.ca/en/refugee-protection-hearing

For claimants: https://refugeehearing.cleo.on.ca/



- Humanitarian & Compassionate (H&C) applications
- Pre-Removal Risk Assessments (PRRAs)
- Detention reviews
- Deportation appeals at the Immigration Appeal Division (IAD)
- Danger Opinions

- Requests to Canada Border Services Agency (CBSA) to defer removal
- Motions to Federal Court to stay removal
- Family reunification (ineligible family, expediting)
- Seeking waiver from some citizenship requirements



Legal relevance of medical documentation for other proceedings

- To identify potential mental health impact of deportation of vulnerable person
- To contextualize past criminal or dangerous behaviour
- To assist decision maker in understanding current or past barriers to giving testimony
- To identify mental health impacts of past trauma
- To prompt the positive exercise of humanitarian and compassionate discretion

Role of documentation for H&C Discretion

... "those facts, established by the evidence, which would excite in a reasonable man [sic] in a civilized community a desire to relieve the misfortunes of another — so long as these misfortunes 'warrant the granting of special relief from the effect of the provisions of the Immigration Act."

Chirwa v. Canada (Minister of Citizenship and Immigration) (1970) 4 I.A.C. 338



- Letter from doctor/hospital explaining diagnosis and medical care required
- Hospital records
- Prescriptions for medications
- Connection to psychiatrist, psychologist or therapist, would conduct assessment and provide diagnosis and care required
- Letter from medical professional in country of nationality or expert on unavailability of care

https://www.cleo.on.ca/en/publications/handc

http://schliferclinic.com/wp-content/uploads/2018/05/HC-Toolkit-2018-Update.pdf

 $\underline{https://refugeeclaims.files.wordpress.com/2017/08/hc\text{-}assessment\text{-}or\text{-}support\text{-}letter-}{checklist.pdf}$

Appropriate Legal Aid Referrals

> Legal Aid Certificate Program - for Basis of Claims only

> Refugee Law Office - some appeals

> Community or Specialty Legal Aid clinics Search by postal code:

<u>https://www.legalaid.on.ca/en/contact/contact.asp?type=cl</u>

Case scenario: health care support

- Ms. T waited 4 years for her refugee hearing. During that time she had difficulty accessing health care although she was covered by IFH. VULNERABLE PERSONS/EXPEDITED
- After her claim was accepted, she waited another 3 years for her children to arrive. IMPACT OF FAMILY SEPARATION
- She had precarious work and was required to apply for a work permit every 6 months during those years until she became a PR, coupled with a temporary SIN. She was injured at her factory job and was let go. SUPPORT THROUGH WSIB ETC CLAIM
- She's had limited time for ESL, as she's been working multiple jobs and sending money back home. She's unable to pass the citizenship due to her limited English. WAIVER LETTER



Summary of Best Practices

- Be alert & alive to migration history
- Ask if connected: to lawyer, shelter worker, social worker, settlement worker
- Communicate with advocate early if there is one
- Sign onto an open letter asking the Provincial government to reverse the legal aid cuts!

link: https://forms.gle/4kPJSHsKmMZ1Vsmh8
OR email https://forms.gle/4kPJSHsKmMZ1Vsmh8



Health Justice Tuesdays

Feb. 12, 2019	Health and Housing Law - Dr. Andrew Bond and Benjamin Ries
March 19, 2019	Health and Family Law - Dr. Kathleen Doukas and Ishbel Ogilvie
April 9, 2019	Health and Income Security Law - Dr. Gary Bloch and Anu Bakshi
May 14, 2019	Health and Immigration Law - Dr. Vanessa Redditt and Jennifer Stone
May 28, 2019	Legal Issues affecting people living w HIV/AIDS - Dr. Gordon Arbess and Ryan Peck
June 18, 2019	Health, Law and Indigenous Peoples - Melissa Stevenson, Dr. Fatima Uddin and Emily Hill
Sept. 10, 2019*	Health and Capacity, Decision-Making, and Advanced Care planning - Dr. Bill Sullivan and Mercedes Perez
Sept. 24, 2019	Health and Employment Law - Dr. Andrew Pinto and Nabila Qureshi
Oct. 8, 2019	Health and Criminal Justice System - Flora Matheson and Promise Holmes Skinner
Nov. 19, 2019	Health and Human Rights Law - Dr. Laurie Green and Kerri Joffe



Contact

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