

**Part I**

**St. JAMES TOWN INITIATIVE  
NEIGHBOURHOOD AND HEALTH**

***COMMUNITY VOICES:***  
**Tackling Inequity**  
**Through a Community Based**  
**Initiative on the Social Determinants of Health**

By  
Nasim Haque  
Erin Moriarty  
Emily Anderson

November 2008



## TABLE OF CONTENTS

EXECUTIVE SUMMARY	v
1. Introduction	1
1.1 The Wellesley Institute	2
1.2 The St. James Town (SJT) Initiative	2
1.3 Objectives for the Photo Voice Project	3
2. Background	3
2.1 Community Based Research (CBR)	3
2.2 Photo Voice	4
2.3 Neighbourhood and Health	5
3. The Process	7
3.1 The Project Area: North St. James Town (SJT)	7
3.2 Methods	7
3.2.1 Timeline	7
3.2.2 Sampling	7
3.2.3 Training, Sharing and Formation of the Steering Group	8
3.4 Data Collection	10
3.5 Data Analysis	11
3.6 Study Limitations	11
4. Results	11
4.1 Community Voices: Themes and Sub-Themes	11
I. Macro-Structural Factors	12
Ia. The Responsibility of Authorities	13
Ib. Economic Risks and Barriers	15
Ic. Social Supports	17
II. Place Based Factors	19
IIa. Location of Neighbourhood	19
IIb. Buildings and Apartments	19
IIc. Places for Physical Activity and Socialization	21
IId. Neighbourhood Amenities	23
IIe. Sanitation and Maintenance	27
III. Behaviour and Attitudes of Individuals and the Community	29
IIIa. Knowledge and Awareness	30
IIIb. Responsibility and Ownership of Residents	32
IV. Social and Community Values	35

IVa. General Values	35
IVb. Participation in the Community and Society	36
IVc. Social Networks and Supports	37
V. State of Mind of Community Members	39
Va. Safety	39
Vb. Fear and Powerlessness	41
Vc. Newcomer Issues	42
Vd. Community Image	44
5. Discussion	46
6. Conclusion	50
7. Recommendations	51
7.1 Neighbourhood Level	52
7.2 Local, Provincial and Federal Government Level	52
8. Sharing of Information	54
8.1 Community and Local Stakeholders	54
8.1.1 Community Forum and Expo	54
8.2 Government and Other Public Stakeholders	54
8.3 General Public	55
8.3.1 SJT Initiative Website	55
9. Moving Forward	55
9.1 Developing an Interactive Google Map: A New CBR Tool	55
9.2 Extending Photo Voice to a New Level:	56
Integration of Photo Voice and Concept Mapping	56
9.3 Establishing Community Advocacy and Action Group: Residents Involvement in Policy Recommendations and Direction	56
9.4 Using Results to Inform Upcoming Structured Qualitative and Quantitative Research	57
10. Lessons Learned	57
11. Innovative Work of the SJT Initiative: Moving CBR to a New Level	60
References	62

## Part II

Annex I: Project Site Map A	3
Annex II: Project Site Map B	4
Annex III: Visual Voices Neighbourhood and Health –Full Stories	5
Annex IV: Steering Group Members	52

## **Acknowledgements**

We would like to acknowledge the hard work, dedication and the support of our community partners and collaborators Community Matters Toronto, the St. James Town Safety Committee and the many residents of St. James Town that we work with. Our sincere thanks to all of the people who have contributed to and worked on this project, in particular Ms. Anissa Bachan, project assistant, and Mr. Ali Moallim, community partner, for their help and support in the initial phases of the project. The collaborative effort and support of this process from all of those involved made the Photo Voice project a success.

Thank you to all of the participants and the SJT Steering Group members for their dedication, commitment and professionalism and for bringing their ideas and perspectives of the SJT neighbourhood. We wish to thank the following members of SJT Steering Group for reviewing the report: Mr. Uttam Makaju, Ms. Aklima Halkampi, Ms. Renuka Traja, and Ms. Grace Wang.

Thank you everyone for sharing your voices.

## EXECUTIVE SUMMARY

The *St. James Town (SJT) Initiative*, underway since March 2007, is the Wellesley Institute's largest community-based action research and community capacity building initiative, and its signature project. The *Initiative* is fully funded for five years by the Wellesley Institute and focuses on the social determinants of health (social, physical, and economic conditions) in the North St. James Town neighbourhood in Toronto and examines whether these factors have a differential effect on the health and wellbeing of newcomers of different ethno-racial backgrounds residing in. By design, the *Initiative* is an inclusive process that started its work in the neighbourhood by engaging a disadvantaged population (newcomers) and working with them to explore the health issues they experience through their perceptions. This approach uses community based knowledge to develop meaningful, responsive research to advocate for policies and interventions that reflect the true needs of the people involved, rather than compiling information from a framework of pre-defined problems or a menu of solutions. Equity consideration is central to the *Initiative* as it promotes and moves away from the classic supply model of traditional research to the demand model of inclusive community based inquiry and advocacy.

North St. James Town (SJT) is a central Toronto neighbourhood located in the northeast corner of Toronto's downtown core (Census Tract 0065.00). About 14,666 people (resident estimates are higher at 25-30,000 people) occupy the community's 0.23 km<sup>2</sup> of land, almost all of whom live in 18 aging high-rise apartment buildings (Annex II). Today, with 64,636 people /km<sup>2</sup>, SJT is one of the most densely populated areas in Canada, and is home to a very diverse population. About 64% of SJT residents are newcomers; 26% of these arrived in Canada within the last five years, and the majority are visible minorities (Statistics Canada, 2006).

St. James Town provides an excellent context for this study because of the diversity of the neighbourhood as well as the challenges and opportunities present within this small geographic area. SJT is a convenient place for newcomers to establish themselves in a new country, as it is within walking distance of schools, community services, stores, and public transit. It is in close proximity to some of the city's wealthiest neighbourhoods, and the downtown core. These positive amenities make it similar to newcomer receiving neighbourhoods in other Canadian city cores. The neighbourhood also faces a number of challenges such as aging infrastructure, limited open space and potential safety concerns. Understanding the intersection between newcomer health and neighbourhood influences in SJT will shed light on neighbourhood influences on newcomers' health in other Canadian immigrant receiving urban neighbourhoods, and on the ways in which newcomers are successfully utilizing their local and community resources to promote their health and well being.

This report reflects the "voices" of SJT newcomer residents through the use of Photo Voice. Photo Voice is a powerful and inclusive methodology because it places power in the hands of study participants from the onset. It enables underrepresented, marginalized people to record and reflect their personal and community's strengths and concerns through photographs which generate dialogue, and share knowledge about important local issues (C. C. Wang et al., 2000). It has been used to engage and empower marginalized individuals and communities who are frequently left out of decision making processes and have often been the subject of research

without any involvement in research planning or even knowing the outcomes of the studies. This has led to understandable resistance to formal research and interventions in marginalized communities. The Photo Voice methodology gives community people a voice. It creates an opportunity to raise collective awareness of issues and challenges that they have experienced. As such, it has proven a particularly effective research approach that can be used to increase knowledge about people's perceptions and behaviours in marginalized communities. At the same time, Photo Voice can create a foundation for social change at the community level (C. C. Wang, Morrel-Samuels, Hutchison, Bell, & Pestronk, 2004). By building the capacity of participants and by valuing their knowledge and experiences, Photo Voice can be used to advocate for change by promoting a critical dialogue that brings together planners and policymakers through actions such as community forums, exhibits and workshops.

The findings from this study indicate there are a multitude of neighbourhood factors that influence the health and wellbeing of St. James Town residents. Through this process, the positive characteristics of the St. James Town neighbourhood were highlighted as well as the negative features that created barriers to achieving good health and wellbeing. Participants articulated the physical as well as the social environment that contributed to or detracted from their ability to meet their needs. The perception of mental and emotional health appears to be the most sensitive aspect of wellbeing in relation to negative and positive neighbourhood characteristics. As one participant expressed;

*People are used to meeting and caring for their neighbours and extended families in their countries of origin. In this colder climate they are also greeted with a colder social climate where the physical settings do not give them the same opportunities that they had sitting on their front porches and talking to the community as it flows by their door. In this country, the high-rise apartment space needs to be softened by a lush park setting where people can break down the isolation that the wall of their apartments imposes.... Like the squirrel [an apparently sick squirrel with only three legs captured in the participant's photo] isolated and depressed people deteriorate and develop sickness and become a liability to the health system – at great social cost.*

This quote shows the connections one resident is making between the quality of the social and physical environment and the long term consequences to health and wellbeing.

The neighbourhood physical, economic, cultural and social (SDOH) variables affect individuals' capacity to meet their own needs through the creation of opportunities and or barriers to achieving good physical and mental health and wellbeing in the course of daily life. The concept of health as "the state of complete physical, mental and social wellbeing, and not simply a lack of disease" (WHO) was elaborated on in different ways by participants. It encompassed the physical characteristics of the neighbourhood, social networks, expectations of individuals and society in general, values and goals, as well as individual's state of mind. The results indicate that there are many processes at work in St. James Town, factors that interact in a multitude of ways and at different scales that are positively and negatively influencing the health and wellbeing of newcomer residents.

The SJT residents highlighted specific neighbourhood characteristics as well as the complexity of relationships and perceptions that exist for different people through the utilization of these amenities and features. For example, due to its location in downtown Toronto, St. James Town provides good (geographical) access to many of the city resources. However, most participants in

this project expressed their dissatisfaction with the quality and quantity of services and material goods available in the neighbourhood. Wider research indicates that lower socio-economic households are most likely to be reliant on the services and amenities in the local neighbourhood. Being close to many of the amenities in downtown Toronto is an asset, but many of the residents face financial as well as social constraints (such as language barriers, lack of Canadian work experience and credentials) which dictate the true access individuals have to the resources available within and beyond the boundaries of the neighbourhood. Participants highlighted that there is a tremendous need for accessible, affordable and appropriate services that are equitably distributed in the vicinity to meet the needs of this very densely over populated, low income area. Residents expressed frustration; especially concerning the availability, quality and accessibility of public spaces in general and green spaces in particular.

Availability of quality green spaces in the neighbourhood was expressed as one of the many important requirements. Though there are some small parks and green spaces in SJT, often they are not well maintained. The need for quality green spaces was reiterated for several reasons: a) provides an outlet for people of all ages to escape the small spaces and sometimes crowded conditions of the high rise buildings; b) provides a place where newcomers can socialize and meet others; c) provides space for children to play and engage in physical activity; d) access to beautiful spaces relieves stress and creates pride and feelings of wellbeing. Many participants were concerned about safety in the neighbourhood. Inadequate lighting of the streets and public spaces was perceived to promote deviant and criminal activities. Participants emphasized specific areas they did not use at night because of perceived safety risks and were upset over the consistent negative behaviour occurring in certain areas in the neighbourhood. Building maintenance (internal and external), garbage collection and disposal, lack of recycling facilities, lack of safe bicycle storage spaces, non-functional local swimming pools and limited access to quality gymnasium were some of the other challenges facing SJT residents. Participants felt that many of these negative features of St. James Town were contributing to continued stigmatization and the lack of improvement of the area.

The importance of macro-structural factors was an over arching theme, the influence of the broader political, economic and social climate was identified, with many participants feeling powerless to address the problems that were believed to be ingrained in issues beyond the boundaries of the neighbourhood. Participants believed that the health inequities in the community were primarily due to the unequal distribution of power, income, goods and services. These results support other research indicating that the root causes of declining health among newcomers lay in the social and structural conditions of the neighbourhood which are related to but not necessarily within the realm of the traditional health system. The relationships between the physical and social variables suggest that the issues need to be addressed through inter-sectoral and cross-government investments and actions. Participants in general believed that there had to be involvement of all levels of government to address the roots issues experienced in the neighbourhood. Coordinated efforts are needed to ensure that the problems that exist are not plastered over and that the root causes are addressed to improve the quality of life of all residents in the neighbourhood and beyond. As one participant eloquently articulated:

*The goal is to realize that people should not merely exist in St. James Town; rather, it is to discover that they truly yearn, whether they are aware of it or not, to be involved citizens of the place they call home. ...What the community needs is for someone...[to] provide the resources to enhance their capacity to participate*

*in Canadian society in ways that can be seen and felt, because, after all, they do strive to be part of their new country and to make meaningful lifelong contributions to Canadian society.*

## **Recommendations**

The results from this study indicate that actions are required at multiple levels:

1. Neighbourhood
2. Local government
3. Federal and Provincial Policies

### **Neighbourhood Level**

Participants felt that the community members themselves have a key role to play in addressing some of the identified neighbourhood concerns and challenges. They felt that residents could commit and contribute to a process of continuous improvement of the neighbourhood with appropriate direction and support (technical and financial) to initiate such actions. The importance of building capacity and educating residents was highlighted as an avenue for positive change. Public awareness programs on topics such as: a) individual rights and responsibilities; b) the importance of personal health supports such as hygiene, physical activity and nutrition; c) the importance of recycling and environmental awareness etc. were noted as places to start. Participants emphasized the importance of utilizing existing community resources to strengthen existing networks and to ensure that the programs and opportunities are presented inclusively and are culturally appropriate in a multitude of different languages to meet the needs of this diverse community.

### **Priorities for local government**

Many of the issues identified in the neighbourhood clearly fall under the realm of various municipal departments of the local government. For example, the following recommendations fall under the jurisdiction of the city: a) improving and implementing recycling programs; b) adequate disposal of solid waste management; c) implementing bylaws for adequate building maintenance; d) maintaining green spaces and parks; e) implementing public awareness programs in consultation with the community.

### **Priorities for Federal and Provincial Governments**

Many participants articulated in their stories that addressing many of the social determinants of health that contribute to health and wellbeing of newcomers should be a government priority, and resources should be allocated accordingly. For example, participants highlighted that the quality of life and capacity of newcomers to Canada would be greatly improved with: a) recognition of foreign qualifications; b) supports for the integration of newcomers into the formal labour market; and c) resources for newcomers to acquire required Canadian experience to enter the labour force. All of these factors contributed to newcomers' physical, emotional and mental health and if such policies and programs are not supported by the governments as a priority and resourced appropriately, newcomers to this country will stand little chance of overall success and for maintaining the health advantage that they come with.

The results indicate that health and wellbeing are affected at the neighbourhood level, the majority of which are not within the realm of the health system. To effectively address social



determinants of health such as income, living conditions, equitable service availability and accessibility (to name only a few), inter-sectoral and cross-government actions ranging from the local to the national level are required. Similarly, to effectively address the issue of integration of newcomers in the formal labour market, a multi-sectoral approach, involving cooperation and collaboration across the private and public sectors are required. The voices of people and community are important and efforts should be made to incorporate their views in all phases of program development and program evaluation.

## 1. Introduction

Health is a basic human right. Article 25(1) of the Universal Declaration of Human Rights (United Nations General Assembly, 1952) acknowledges that access to quality housing, recreation and green spaces, healthy food, a safe environment, economic opportunities, and social networks affect our health and wellbeing and our ability to utilize health care and other services. Providing basic health care services to all members of society is important and necessary but it is also essential to address social (non-medical) determinants of health to overcome existing health inequalities (CSDH, 2007) because the social, physical, and environmental conditions in which people live and work have a powerful influence on their health and wellbeing (United Nations General Assembly, 1952). The World Health Organization (WHO) defines health inequality as differences that exist in health status or in the distribution of health determinants between different population groups. For example, differences in mobility between elderly people and younger populations or differences in health and wellbeing between people from different socio-economic classes. These differences may occur because of the lack of, or the establishment of social policies and programs that may not allow equitable societies to flourish. Some groups, therefore, are exposed to greater health risks than others. Health inequalities that are attributed to external social and environmental conditions and are due to the uneven distribution of resources are avoidable as well as unjust and unfair. Health inequalities resulting from such conditions lead to health inequities because it creates a system where not all individuals have fair and equal access to the opportunities and resources necessary to attain their full health potential (WHO, 1985).

Canada welcomes an average of 225,000 newcomers annually from all over the world (Statistics Canada, 2006). About three quarters of these newcomers (both landed immigrants and refugees) settle in Canada's three largest metropolitan gateways (Toronto, Vancouver and Montreal), with Toronto becoming home to nearly half of all new immigrants (Statistics Canada, 2003). Newcomers come to this country with a health advantage but research shows that newcomers' health declines to Canadian-born levels relatively soon after arriving in Canada (Chen, Ng, & Wilkins, 1996; Chen, Wilkins, & Ng, 1996; Ng, Wilkins, Gendron, & Berthelot, 2005). The exact reasons for the decline in newcomers' health are unclear. However, it is now well-established that social, economic, environmental and cultural factors ('social determinants'<sup>1</sup>) are the leading predictors of health (Evans, Barer, & Marmor, 1994; Raphael, Bryant, & Curry-Stevens, 2004; R Wilkinson, 1996; R Wilkinson & Marmot, 2006; Wolfson, Kaplan, Lynch, Ross, & Backlund, 1999). The influence of these social determinants on newcomer health has focused largely on individual-level forces (Dunn & Dyck, 2000; Dunn, Veenstra, & Ross, 2006; Hyman, 2006). Little is known about neighbourhood-level influences on newcomer health, yet extensive research shows that the social, economic, service and built environment aspects of individuals' living contexts can strongly influence their health, over and above individual-level influences (Caughy, O'Campo, & Muntaner, 2003; Phillimore, 1993; Sooman & Macintyre, 1995).

This project, *Community Voices*, is the first step in the *St. James Town Initiative*, a five year community-based action research and community capacity building initiative that aims to fill an

---

<sup>1</sup> "SDOH are life enhancing resources, such as food supply, housing, economic and social relationships, transportation, education, and health care, whose distribution across populations effectively determines length and quality of life." (Ramirez, Baker, & Metzler, 2008).

evident gap in the body of research on social determinants of health and newcomers' health and wellbeing. *Community Voices* explored newcomers' perceptions about their neighbourhood and its implications on their health and wellbeing.

### **1.1 The Wellesley Institute**

The Wellesley Institute is a Toronto-based non-profit and non-partisan research and policy institute. Through its origins in the former Wellesley teaching hospital – a pioneer in urban health initiatives – and its successor the Wellesley Central Health Corporation, the Wellesley Institute was created after the Wellesley hospital was torn down in 1998 to continue developing research and community-based policy solutions to the problems of urban health and health disparities. The Wellesley Institute is well established in the North St. James Town neighbourhood and has an ongoing commitment to promote its residents' health and wellbeing through community-based research and action on the social determinants of health.

### **1.2 The St. James Town (SJT) Initiative**

The *St. James Town (SJT) Initiative*, underway since March 2007, is the Wellesley Institute's largest community-based research and community capacity building initiative, and its signature project. The overall goal of the *St. James Town Initiative* is to help newcomers maintain the good health that they have when they arrive in this country. The *Initiative* focuses on the social, physical, economic and environmental conditions and examines whether these factors have a differential effect on the health and wellbeing of newcomers of different ethno-racial backgrounds residing in the North St. James Town neighbourhood in Toronto (Annex I). By design, the *Initiative* is an inclusive process that started its work in the neighbourhood by engaging newcomers and looking at health issues through their lenses, rather than from a framework of pre-defined problems or a menu of solutions.

The *Initiative* is planned to last for five years and is fully funded by the Wellesley Institute. The *Initiative* concentrates on the health and wellbeing of newcomers' in the North St. James Town neighbourhood and uses a two-pronged approach: (i) gathering new information (research) for informing and mobilizing the community as well as for policy advocacy; (ii) building human capacity in the community to enable people to take leadership roles and supporting them to bring about the positive social changes required for the development of the community. It is expected that the *Initiative's* community-based, 'bottom-up', and collaborative approach to the research and capacity building process will produce findings that increase knowledge, inform policy and be a catalyst for concrete actions that will make the SJT neighbourhood a healthier place to live.

In the first year, the *Initiative* focused on ways to effectively engage the community and understand the perceptions of newcomers regarding neighbourhood and health. To achieve these objectives, two arts-based participatory research methods, Photo Voice and Community Mapping, were employed. This report presents the findings from the Photo Voice project. The findings from the community mapping project will be presented separately in a report that will be available at [www.sjtinitiative.com](http://www.sjtinitiative.com). Please refer to Moving Forward: Section 9 of this document to learn more about the continuing work of the *SJT Initiative*.

### 1.3 Objectives for the Photo Voice Project

1. To lay the ground work for the SJT Initiative;
2. To engage and involve newcomers from the initial stages of the project;
3. To help newcomers identify neighbourhood characteristics that they perceive to influence their health and wellbeing;
4. To advocate for positive social changes in SJT through recommendations for policy reform;
5. To inform and guide the contents of the upcoming qualitative and quantitative studies of the *Initiative*.

## 2. Background

### 2.1 Community Based Research (CBR)

The *Initiative* is based on the principles of a learning community<sup>2</sup> and follows the core principles of community based research (CBR). Though there are many forms of CBR, the eight foundational principles outlined by (Israel, Schulz, Parker, & Becker, 1998) are as follows:

1. Recognizes community as a unit of identity;
2. Builds on strengths and resources within the community;
3. Facilitates collaborative partnerships in all phases of research;
4. Integrates knowledge and action for mutual benefit of all partners;
5. Promotes a co-learning and empowering process that attends to social inequalities;
6. Involves a cyclical and iterative process;
7. Addresses health from both positive and ecological perspectives;
8. Disseminates findings and knowledge gained to all partners.

With careful attention to these principles, CBR allows for a greater understanding of the complex and multi-dimensional issues found in public health because it facilitates the engagement of community partners who have firsthand knowledge and experience of the issues being explored. The ultimate goals of CBR, through the process of bringing people with diverse skills and knowledge together is to develop meaningful, responsive research to advocate for policies and interventions to improve health and wellbeing. With the inclusion of community in the research process, the depth and relevance of findings are greater as the outcomes represent the true needs and perceptions of the people who will ultimately be affected by the research process as well as the outcomes (Israel et al., 1998).

CBR recognizes that “knowledge is power” and that it comes in many different forms and from many valuable sources, not just ‘expert’ researchers and practitioners (Israel et al., 1998). In order to effectively share knowledge and the power associated with it, careful consideration must

---

<sup>2</sup> A ‘Learning Community’ is made up of people who share a common purpose. They collaborate to draw on individual strengths, respect a variety of perspectives, and actively promote learning opportunities. The outcomes are the creation of a vibrant, synergistic environment, enhanced potential for all members, and the possibility that new knowledge will be created (Minkler & Wallerstein, 2003).

be given to the rights and responsibilities associated with the process and outcomes of community based research. There are opportunities and risks for all the stakeholders that are involved but participants must be aware of these at all stages in the research process and it must be consensual. Including the community in all aspects of the research process on one hand, helps the researchers to learn from the lived experiences of the community and on the other hand, it makes it possible for the community to build its capacity through training, sharing, relationship building and decision making.

## **2.2 Photo Voice**

In this study, the community's voices are captured and shared through photos and stories using the Photo Voice technique. Photo Voice is an arts-based participatory action research process by which people can identify, represent and convey specific issues happening in their community through pictures (Wang, Cash, & Powers, 2000). This technique uses qualitative and investigative methodology. Participants are trained to use cameras and storytelling to voice their experiences and concerns. Increasingly, arts-based research methods are being used in the health sector to explore and provide insights into health issues and service delivery because these approaches are adaptive, subjective and can be used to understand the effectiveness and perceptions of health and health care issues from the perspectives of clients, health care professionals, and those who are not or cannot access specific services (Wang, 1999; Wang, Anderson, & Stern, 2004).

Photo Voice is a powerful and inclusive methodology because it places power in the hands of study participants from the onset of the project. It enables underrepresented, marginalized people to record and reflect their personal and their community's strengths and concerns through photographs which generate dialogue, and share knowledge about important issues (C. C. Wang et al., 2000). It has been used to engage and empower marginalized individuals and communities who are frequently left out of decision making processes and have often been the subject of research without the benefit of having access to the information or even knowing the outcomes of the studies. This has led to understandable resistance to formal research and interventions in marginalized communities where people feel that they are the subject of research, not active participants. Photo Voice has been able to break these barriers and engage vulnerable and marginalized individuals and communities in sharing their ideas, perceptions and life experiences, thus "shift[ing] control over representation and knowledge generation from those in positions of power to those whose perspectives are seldom seen or heard." (Lopez, Eng, Robinson, & Wang, 2005). Notable examples include the use of Photo Voice to understand the experiences of women living in rural communities in China (C. Wang, Burris, & Ping, 1996), to understand chronic pain in older adults (Baker & Wang, 2006), and to understand the perceptions of health and healthy behaviour of adolescent parents (Stevens, 2006).

A recent Canadian study provides a positive and in-depth evaluation of a Photo Voice project which involved Indigenous people on the Canadian West Coast to better understand the health and environmental risks in the Huu-ay-aht territory (Castleden, Garvin, & Nation, 2008). The findings of this study point to Photo Voice as an effective methodology to create a balance of power between researchers and the participants in the study, to create a sense of ownership, trust and to build the capacity of the participants to raise awareness and advocate for positive social change. Engaging individuals in participatory research and neighbourhood improvement can also

increase 'social capital' and 'community capacity' (Chaskin, 2001; Cuthill, 2003 ; Hallsmith, 2003; Kearns, 2004; Laverack, 2005; Putnam, 2000). Social capital "refers to the connections among individuals, social networks and the norms of reciprocity and trustworthiness that arise from them" (Putnam, 2000). Community capacity is defined as "the interaction of human capital, organizational resource, and social capital existing within a given community that can be leveraged to solve collective problems and improve or maintain the well-being of a given community" (Chaskin, 2001). Building social capital and community capacity may help to build a sense of community reflected through shared experiences, values, norms and a common vision (Chaskin, 2001). It may also build a commitment to investment, responsibility and action within the neighbourhood through greater participation in organizations or increased individual efforts. By building trust, relationships and possibly skills such as leadership within a neighbourhood, the resulting networks and foundation for collective action is a neighbourhood resource in itself (Chaskin, 2001). These factors are enabling and empowering if they help to build skills, partnerships and networks within the neighbourhood and beyond it (Chaskin, 2001; Hallsmith, 2003; Taylor, 2000). The networks and relationships that are built and strengthened may offer opportunities for knowledge and skill sharing which in itself is capacity and empowerment building.

The Photo Voice methodology gives marginalized people a voice. It creates an opportunity to raise collective awareness of issues and challenges that they have experienced. It is an approach that benefits research as it can be used to increase knowledge about people's perceptions and behaviours while creating a foundation for social change at the community level (C. C. Wang, Morrel-Samuels, Hutchison, Bell, & Pestronk, 2004). By building the capacity of participants and by valuing their knowledge and experiences, Photo Voice can be used to advocate for change by promoting a critical dialogue that brings together planners and policymakers through actions such as community forums, exhibits and dialogues. This can ultimately promote and influence changes that will impact the people who have being involved in the process (C. C. Wang, 1999). The process is a credible and effective way for marginalized individuals and groups to "become advocates in their own lives and communities" (C. C. Wang & Redwood-Jones, 2001).

### **2.3 Neighbourhood and Health**

There is a growing call for a greater understanding and focus on how neighbourhoods affect health and wellbeing in research and policy development (Canadian Institute for Health, 2006; Cummins, Curtis, Diez-Roux, & Macintyre, 2007; Ellaway, Macintyre, & Kearns, 2001; Flowerdew, Manley, & Sabel, 2008; Israel, Schulz, Estrada-Martinez, Zenk, Viruell-Fuentes, Villarruel et al., 2006). Traditionally, socio-economic (for example: household income or education) and other indicators (for example: disease prevalence or birth weight) have been used to understand health and health behaviours (CIHI, 2005), but in order to understand and improve the health and wellbeing of Canadian urban areas, there is a call for a greater emphasis on the social determinants of health as well as community-based participatory research that incorporates people's lived experiences (Bryant, Raphael, & Travers, 2007).

Where people live can influence their health behaviours, the risks they are exposed to and the opportunities available to them. The social, economic, cultural and environmental factors associated with urban areas can for example: influence the choices individuals have regarding the food they eat, the recreational activities they participate in, their housing and their access to social

support and economic resources (CIHI, 2006). Contextual factors at the neighbourhood level have been shown in both qualitative and quantitative research to be associated with differences in health and wellbeing even when compositional factors such as an individual's socio-economic status have been accounted for (Bowling, Barber, Morris, & Ebrahim, 2006; CIHI, 2006; Cummins et al., 2007; Ellaway et al., 2001; Flowerdew et al., 2008; Israel et al., 2006; Warr, Tacticos, Kelahe, & Klein, 2007; Weden, Carpiano, & Robert, 2008). For example in a recent study, fair to very bad self rated health was significantly associated with neighbourhood attributes such as poor quality residential environments and low political engagement in a cross sectional study independent of sex, age, social class, and economic activity (Cummins, 2007). In order to understand, protect and promote health and wellbeing at the neighbourhood level, research needs to go beyond measuring objective, compositional indicators such as household income and mortality rates because though these variables do allow for a broad and comparable understanding, they may not capture the range or the complexity of the relationships between factors that may be affecting health (Weden et al., 2008).

The way individuals understand their health, the social and physical environment they live in and how they interact and experience their neighbourhood can offer insight into ways to strengthen and promote health (CIHI, 2005; Cummins et al., 2007; Weden et al., 2008). The Canadian Institute for Health Information released the report *"Improving the Health of Canadians: An Introduction to Health in Urban Places"* in 2006. This report outlined specific neighbourhood factors which influence health and health behaviours: "social characteristics (for example, social cohesion, social capital, collective efficacy, cultural diversity); socio-economic influences (such as neighbourhood income level); physical environment characteristics (such as neighbourhood conditions, perceived safety, traffic-related risks); access to services (such as food outlets, health services); and transportation-specific issues related to movement between and within neighbourhoods" (CIHI, 2006). Photo Voice can help to capture these characteristics and the relationships between them and health at the neighbourhood level.

A study by Nowell et al. (2006) demonstrates the effective use of Photo Voice as a way to understand the meaning neighbourhood characteristics have for the people experiencing them. In this study, as part of a place based initiative, participants in seven distressed neighbourhoods were brought together to critically reflect on the social and physical aspects of their environment. Through this study, it was discovered that place and the interaction between neighbourhood social and physical characteristics creates 'cues' about individual's personal histories in the community as well as the values, social norms and behaviours that are practiced. Photo Voice is an appropriate methodology to explore how neighbourhood attributes affect health and wellbeing as well as initiate change at the neighbourhood level as the process engages the people who have a vested interest and knowledge of the issues in the geographic area, individuals who will ultimately be affected by any changes that do take place, and policy and decision makers that have the capacity to make the changes (Nowell, Berkowitz, Deacon, & Foster-Fishman, 2006). It allows a holistic and comprehensive exploration of the social and structural environment and allows an examination of how these factors interact which according to Nowell et al (2006) "[enhances] the potential for integrating services and strategies to address the multiple needs of residents." This ultimately can initiate changes that truly represent the needs of the people and can lead to more successful and sustainable strategies that effectively target issues at the neighbourhood level. This is especially important for marginalized and vulnerable populations as

recommendations may reduce health inequities by infusing resources and support where they are needed most (Israel et al., 2006; Nowell et al., 2006).

### **3. The Process**

#### **3.1 The Project Area: North St. James Town (SJT)**

North St. James Town (SJT) is a central Toronto neighbourhood located in the northeast corner of Toronto's downtown core (Census Tract 0065.00). SJT was developed and marketed in the 1960s as a choice spot for hip, urban households. About 14,666 people (resident estimates are higher at 25-30,000 people) occupy the community's 0.23 km<sup>2</sup> of land, almost all of whom live in 18 aging high-rise apartment buildings (Annex II). Today, with 64,636 people /km<sup>2</sup>, SJT is one of the most densely populated areas in Canada, and is home to a very diverse population. About 64% of SJT residents are newcomers; 26% of these arrived in Canada within the last five years, and the majority are visible minorities (Statistics Canada, 2006). SJT is home to many ethno-racial communities, including Filipino, Tamil, Chinese, Pakistani, Korean, Bangladeshi, Indian, Nepali, Ethiopian, Somali and Eastern European communities (Statistics Canada, 2001). Interestingly, about 25% of residents in St. James Town have a university degree which is the same as the Toronto average whereas the average household income in SJT is only \$32,539, almost half of that reported for Toronto (\$69,194) ("N74-North St. Jamestown Profile: Socio-demographic," 2005).

St. James Town provides an excellent context for this study because of the diversity of the neighbourhood as well as the challenges and opportunities present within this small geographic area. SJT is a convenient place for newcomers to establish themselves in a new country, as it is within walking distance of schools, community services, stores, and public transit. It is in close proximity to some of the city's wealthiest neighbourhoods, and the downtown core. These positive amenities make it similar to newcomer receiving neighbourhoods in other Canadian city cores. The neighbourhood also faces a number of challenges such as aging infrastructure, limited open space and potential safety concerns. Understanding the intersection between newcomer health and neighbourhood influences in SJT will shed light on neighbourhood influences on newcomers' health in other Canadian receiving neighbourhoods, and on the ways in which newcomers are successfully utilizing their neighbourhoods to promote their health and well being.

#### **3.2 Methods**

##### **3.2.1 Timeline**

The field work for this study began in July 2007 and was completed in November 2007. A Steering Group of nominated participants continued to work with the SJT project staff in preparation for the Community Forum & Expo to disseminate the findings from the project (Annex IV). Many participants continue to be involved with the *Initiative* and are working together on a second steering group towards translating the evidence of this report into action. They are using the power of their photographs and stories to communicate their views with city policy makers and planners advocating for the social changes required for maintaining the health and wellbeing of residents in the SJT neighbourhood.

##### **3.2.2 Sampling**



Participants were recruited using a purposive sampling method. Most participants were recruited through Community Matters Toronto, a partner grassroots organization providing a multitude of social services in St. James Town. Some participants were recruited through the SJT Safety Committee, a collaborating grassroots organization, and a few participants were recruited by word of mouth. The initial sample size was thirty four; however, seven participants stopped participation within the first 4-6 weeks due to personal and or family reasons. The final sample size was twenty-seven participants, most of whom continue to be involved with the *Initiative*.

### 3.2.3 Training, Sharing and Formation of the Steering Group

Two half-day workshops, one in the beginning and one towards the end of the project period, were organized to orient, train, and share experiences. A Photo Voice expert, Nancy Davis Halifax was hired to conduct the first training workshop. This workshop provided the platform for participants to meet and interact with each other. The project, the roles and contributions expected of participants, and the expected outcomes of the work were explained to participants. The overall theme of the project, “Neighbourhood and Health,” was outlined to them. Definitions were described, and participants were encouraged to discuss and comment on these definitions. “Neighbourhood” and “health” were defined as follows:

***Neighbourhood** is a physically bounded area characterized by some degree of homogeneity or sameness, and sometimes social cohesion. Neighbourhoods may also be defined as a small part of a bigger geographic unit considered in regard to its inhabitants or distinctive characteristics.*

***Health** is the state of complete physical, mental and social wellbeing, and not simply a lack of disease (WHO).*

The participants were exposed to various examples of ways photography can be used to express perspectives and experiences, which included photos about sensitive issues that were taken by individuals in other similar projects. Various guidelines were laid out to enable participants to take effective photos while respecting the autonomy and dignity of others. For instance, in the sample photos, the faces of people were not captured; however the pictures very effectively reflected the sensitive issues that participants wanted to highlight. The importance of getting consent to take identifiable photos of people was emphasized. Individuals were told that: “No photograph is ever worth taking if it brings harm to anyone, or to the community!” At the end of the session, participants were given copies of consent forms and disposable cameras. They were shown how to use the cameras and asked to try them before they left the workshop.

Towards the end of the project, the participants selected three photographs they had taken that best represented how they felt about the SJT neighbourhood and its relationship to health. They then wrote stories that captured their perspectives and experiences and attended another workshop to share their experiences, their photos and their written stories with the other group members. In this workshop, ideas on how to move forward with the project were also brainstormed. The group decided that they would like to share their work and the findings with the community and people outside the neighbourhood in a Community Forum and Exposition. To make this event possible, four participants from the Photo Voice project were nominated by the

group. These individuals were willing to work with project personnel to prepare all of the details for the Community Forum and Exposition to share their work with the community and others.

Through a similar process, three individuals were nominated from the Community Mapping group. Through careful consideration, it was decided that the community event would serve as a dissemination platform for both projects because the themes that were captured around neighbourhood and health were very similar. The seven nominated members from the two projects and two staff members from the *SJT Initiative* formed the Steering Group. This group was responsible for all the logistics including organizing and developing the contents for the Community Forum and Exposition. Between December 2007 and March 2008, the group regularly met once a week in the office of Community Matters Toronto, the community partner organization to discuss the event.

For the purpose of the event, the Steering Group decided to randomly select two photos and the corresponding stories from each of the participant's group of three, providing 54 photos instead of the possible 77. This was done to minimize costs and accommodate the logistics of the limited space for the exposition. It was also agreed that the main point from each of the selected photo stories would be extracted and agreed upon by the group. This methodology would provide a summary quote under each of the photos that would reflect the photographer's viewpoint. The actionable points in the captions (which are quotes from the stories) were highlighted in a bold font to capture the attention of planners and program managers that the group was expecting in the audience. A website for the *SJT Initiative* ([www.sjtinitiative.com](http://www.sjtinitiative.com)) was launched at this time to provide another medium for the dissemination of information. The Steering Group chose three stories to be read by the authors and videotaped for display on the website. These stories and photos were chosen because of their holistic outlook representing newcomers' issues. The Steering Group was also responsible for selecting a suitable venue for the event, designing and distributing the promotional materials such as flyers and setting up on the day of the event.

### **3.3 Ethics**

Conducting Photo Voice as a community based research approach raises important ethical considerations about power and safety. These issues were addressed throughout the research process but were introduced at the onset to participants during the two half-day training workshops. To ensure participants were fully informed of the research process, the possible risks involved to participants and to possible photographed subjects, there was a discussion about ethical considerations. Participants also signed a consent form that outlined their role in the project as well as gave permission to use their stories and pictures in public spaces. This occurred before the participants received any photography training. It was also important to guide participants through the research process, outlining the principles behind this approach as well as the risks and benefits to participating.

Before participants were given a camera, their rights and responsibilities as photographers were discussed. A lot of time was spent discussing the importance of obtaining written consent from individuals in order to take pictures, even in public places. This is because according to Wang & Redwood-Jones (2001), "[t]he camera gives the photographer power to create meaning about the subject of the photograph." The relevance of this was discussed due to the ability of a photograph

to capture a moment in time in a very visible and lasting form which may be interpreted without the true context of the situation it was taken in.

Taking photographs without permission may be an intrusion into people's privacy and could cause individuals undue stress. It is possible to capture photographs of people acting in ways that should not be shared in public due to their embarrassing, illegal or sensitive nature or portray the subject in a false light (Wang & Redwood-Jones, 2001). In this project, obtaining signed consent from individuals who were eighteen years or older or by a legal guardian, gave the photographer permission to take the photograph of the subject and for it to be used in the study once developed. The consent form had an additional brochure which outlined the goals of the project, how the pictures would be used and gave additional contact information if anyone had questions. Participants who were obtaining signed consent were given a short list of instructions on how to approach subjects and explain the process. This was also talked about in the workshop with the professional Photo Voice consultant where examples of photos from other projects were used to highlight possible issues and solutions to the problem. Careful attention to the consent process protects individuals in the neighbourhood as well as the participants as it reduces the likelihood of people being annoyed or upset over their picture being taken. In the case of any individuals who were captured on film without signed consent, perhaps because they were in the background of a picture, they were made anonymous by blurring any distinguishable features once the pictures were developed.

General safety was also discussed in the training workshop, ensuring that participants knew the possible risks and were encouraged to be aware of their surroundings at all times (Wang & Redwood-Jones, 2001). Individuals were allowed to stop their participation at anytime during the research process. They were also given the option of remaining anonymous or sharing their identity alongside their photographs and stories in all dissemination events and materials.

### **3.4 Data Collection**

The participants were given four weeks to take photos of neighbourhood attributes that they perceived to be important for their health and wellbeing. They were directed to take a minimum of eight pictures to allow them to capture a number of ideas; the maximum they could take was the maximum allowed by the disposable camera, generally twenty four exposures. Once they were finished taking photos, the participants were asked to drop off their cameras at one of two organizations in the community (Community Matters Toronto or the SJT Safety Committee), or at the project office at the Wellesley Institute. To keep track of the cameras and participants, the cameras were labelled and numbered and the information was entered into a database.

Participants who had not dropped off their cameras were contacted in the fifth week. At this stage, seven participants had opted to drop out of the project. Twenty-seven cameras were collected and the photos were developed. The number of photos developed in each camera varied, and ranged from eight to twenty four exposures. Subsequently, each of the participants was contacted and a time was arranged for an *SJT Initiative* project member to bring the photos to the participant. They were asked to select three of the best photos from all the photos that they had taken and write a one-page story on each of the selected photos. Participants who were not comfortable in writing were provided with support from the project. Through this process, one hundred and fifty photos and seventy seven stories were collected.

### **3.5 Data Analysis**

The data was analyzed in two ways. First, two researchers read the photo stories separately and selected the author's key message regarding each photo. Using as many of the participants own words as possible while simultaneously staying concise and correcting English grammar, short captions were written for each photo. These captions were reviewed until the researchers agreed that the participants' messages were adequately captured. Next, the photos and captions were reviewed with the *SJT Initiative* Steering Group. Changes were made based on feedback from the group to finalize the seventy seven photos with captions.

To explore the details captured by the seventy seven photo stories, content analysis was carried out. The content analysis was performed by two researchers separately, then discussed and modified until agreement was reached about how the information was categorized. Through this process, 197 factors were identified and classified under five main themes and sub-themes (Section 4.1).

### **3.6 Study Limitations**

Findings from this study should be considered in the context of some limitations. Community based research is often questioned for its validity, reliability and objectivity as traditionally in public health research the scientific method is used (Israel et al., 1998). Because this research is qualitative and looks at a small geographic area, the generalizability may be limited (Cummins et al., 2007). This study also specifically focused on newcomers' perceptions of health and their neighbourhood and all the participants had fairly good comprehension of the English language. Almost all participants were able to speak and write in English. Perceptions of newcomers who do not communicate in English, long-term residents, and people born in Canada were not captured; their views may be different from the individuals that participated. This study is a snapshot of the SJT neighbourhood and things may change over time.

## **4. Results**

A total of 27 newcomer residents participated in the Photo Voice project. The age of the participants ranged from 18 to 68 years with a mean of 35.3 (SD = 14.0 years). Length of time lived in the neighbourhood ranged from 6 months to 26 years, with a mean of 5.5 years (SD = 5.9 years). Slightly more than half the participants (n = 16; 60%) were female. The majority of participants indicated they were born outside of Canada (n = 24; 90%). Only three participants indicated they were born in Canada. Nearly three quarters of the participants had either a college or university education. Participants reported a broad range of ethnic backgrounds, including Tamil, Chinese, Filipino, Somali, Kenyan, Arab, Tamil, Tibet, Bangladeshi, Nepali, Pakistani, and West Indian.

### **4.1 Community Voices: Themes and Sub-Themes**

The themes captured in participant's photographs and the stories they shared cover a diverse range of topics in the St. James Town neighbourhood that relate to their health and wellbeing. Most stories explore and highlight social determinants of health (SDOH) rather than primary

health care issues as the main source of opportunities or deficits for achieving neighbourhood and personal health and wellbeing. The full stories and all of the photographs can be found in Annex III. The five key themes that were identified through this process in understanding the neighbourhood characteristics that positively and negatively affect the health and wellbeing of residents are: I) Macro-Structural Factors; II) Place Based Factors; III) The Behaviour and Attitudes of Individuals and the Community; IV) Social and Community Values; and V) The State of Mind of Community Members. These themes are further understood by the sub-themes below.

- I. Macro-Structural Factors
  - a. The Responsibility of Authorities
  - b. Economic Risks and Barriers
  - c. Social Supports
- II. Place Based Factors
  - a. Location of Neighbourhood
  - b. Buildings and Apartments
  - c. Places for Physical Activity and Socialization
  - d. Neighbourhood Amenities
    - i. Community Organizations
    - ii. Health
    - iii. Transportation
    - iv. Food
  - e. Sanitation and Maintenance
- III. The Behaviour and Attitudes of Individuals and the Community
  - a. Knowledge and Awareness
  - b. Responsibility and Ownership of Residents
- IV. Social and Community Values
  - a. General Values
  - b. Participation in the Community and Society
  - c. Social Networks and Supports
- V. The State of Mind of Community Members
  - a. Safety
  - b. Fear and Powerlessness
  - c. Newcomer Issues
  - d. Community Image

## **I. Macro-Structural Factors**

Macro-structural factors are defined as those variables that operate at broader and higher institutional levels than the community, such as at different levels of government or Canadian society in general. Many of the participants highlighted these factors as influencing their health and wellbeing but do not feel that they have the individual capacity to make changes in these areas. The macro-structural factors influence the neighbourhood through direct and indirect relationships to the wider political, economic and social climate. The power to make changes to issues around the distribution of resources, the implementation of current policies or the opportunities and barriers in the economic environment reside with governing and decision making bodies outside of the neighbourhood. The three key sub-themes that emerged as powerful

determinants of the health and wellbeing for individuals and the neighbourhood are: Ia) The Responsibility of Authorities; Ib) Economic Risks and Barriers and Ic) Social Supports.

### **Ia. The Responsibility of Authorities**

Participants felt strongly that in order to improve the health and wellbeing of all residents within the neighbourhood, the involvement of authorities outside the community, i.e. the “government” and “policy makers,” are needed to address many of the problems they identified in St. James Town through changes in social and economic policy, enforcement, and the implementation and support of programming targeting the issues identified.

A number of residents felt that it is the responsibility of the authorities to ensure that the different needs of vulnerable individuals, such as seniors, people who are experiencing homelessness and people with mental issues, are addressed and supported. There were feelings that not all members of the community could participate equally in the neighbourhood or in the wider society because their basic needs are not being met. This impacts the lives of other residents as it pervades feelings of powerlessness and frustration, for example, the quote below captures the feelings of a participant regarding the scope of social issues prevalent in the neighbourhood and the hopelessness of addressing these on their own.

*This person needs more help... I don't know if he receives any help or even has a place to live. ...I don't think the community can help with this problem. I think it is the government's job.*



*I think the policy makers should put the elderly in their forefront agenda... to enhance the livelihood of the elderly in our community... Seniors are the backbone of the society and I think we should not forget them. ...Most of them are by themselves and they need some way of socializing or somebody coming over and checking up on them... These programs will enhance the lives of the elderly so that they don't feel like the community has neglected them.*

Participants acknowledged that the quality of and access to health care facilities does play a role in developing and maintaining health and wellbeing in the neighbourhood. As noted in one of the photo stories: *policy makers should try to study the programs to evaluate and increase [the number of health] facilities in the community so that the community becomes a better place.*

There were concerns about the wider changes occurring in the neighbourhoods surrounding St. James Town where new condominiums are changing the economic and social landscape as well as the possible future utilization of the neighbourhood for the present residents.



*Close to St. James Town, there are new condominiums being made. ...The mix of rich and poor is a good point. ...[But] we expected affordable houses. Our children grew up here and have a good public school and then have to move away.*

There was a desire for the greater involvement of governing and regulating bodies to ensure the negative physical factors of the St. James Town neighbourhood are addressed. One participant spoke about the possible positive outcomes of greater government involvement in the neighbourhood: *the government should get involved...and give the area a facelift because this is a therapeutic solution.*

Many of the issues were highlighted numerous times with the emphasis on interventions from policy makers and City of Toronto officials to provide more infrastructure support and enforcement to ensure long term changes. There was an emphasis by the participants that because of the density of the neighbourhood, many of the problems are exacerbated and resources are stretched thinly to meet the populations' needs. The issues addressed here highlight the need for coordinated approaches which target the physical appearance of the neighbourhood and exposure to specific health risks. These risks have been noted by participants within and outside the apartment buildings. For example: *policy makers should adhere to make by-laws on making mandatory in installing exhaust fan in kitchens so that tenants should not be victim of this unseen problem.*

*We do not want the policy makers to write endless list of bylaws that supposedly guarantees us a clean environment as tenants. We also want enforcement by inspectors who will make sure the bylaws are maintained by land lords.*



*It is hoped that by presenting a picture of this building the policy makers will take a serious look at some of the persistent problems of rodents and insist that the owners of these apartment buildings upgrade the facilities and provide healthy clean spaces in keeping with the rental code.*





*The government should help stop the pigeon population from growing. In Ottawa, there is a punishment by the community officer or security of that area for feeding pigeons. In parks and on walls they always have signs that read “do not walk dogs without a leash” and “do not feed pigeons.” We should have the same rules here.*



*The population density is also very high. ...The over-crowded situation in these facilities means there is need of more service giving organizations in this community. The policy makers can be educated by this trend that there is growing need of more facilities for the wellbeing of community dwellers.*

### **Ib. Economic Risks and Barriers**

A number of participants spoke about the economic risks and barriers experienced in the neighbourhood. Many SJT residents work long hours, carrying two or more jobs for low incomes and may experience financial difficulties and stress. This also results in strain on families, especially with children as illustrated in the following quote: *parents in the neighbourhood have to work long hours to make ends meet and to ensure that their kids have modest lifestyle.*

Newcomers to Canada in St. James Town experience many barriers to financial stability, including difficulty gaining and maintaining suitable employment due to a lack of Canadian experience and employment references as exemplified in this quote:

*For newcomers it's not easy for them to live here [in Canada] because things are very expensive, like houses. It is harder for newcomers to have a good job because they don't have relationships and need references. Even though we have higher education background we still can't find better paying jobs.*

One of the participants, who has extensive computer programming experience and has been in Canada for twenty five months, has been unable to enter the labour market due to a lack of Canadian experience. It is also difficult to gain financial stability because of the high cost of living in Canada compared to many newcomers' country of origin. These barriers are especially apparent when there are high socio-economic neighbourhoods surrounding St. James Town. The



stark differences in opportunities and resources in a relatively small geographic area is a daily reminder to SJT residents of the barriers that exist in a country of opportunities.

*On one side of the [tunnel], there exists a neighbourhood full of new immigrants who have come from all around the world to be part of the rosy picture promised by the Canadian Government [St. James Town]. On the other side, the picture actually comes to reality [Rosedale]. However, the short journey of crossing the bridge is actually painful, arduous, and for the most part, impossible to most if not all of the individuals living in St. James Town. ... Financial stability leads to calmness, mental stability and a peace of mind. In terms of food, fresher and healthier alternatives such as green groceries are costlier than processed food. The money earned by some people is not even enough to properly feed them, let alone worry about healthy alternatives. Money also leads to better access to health. Most people living in St. James Town do not have the money to buy dental or an eye care plan. ...This entire problem stems from ...the reluctance of the Canadian society, and not the government, to recognize the academic and professional credentials of new immigrants. ...It is in the hands of the person taking the interview to decide whether he will consider foreign experience of a candidate.*



Participants highlighted that low incomes and financial concerns have a significant impact on both physical and mental health; they contribute to stress, unhealthy behaviour such as smoking and restrict access to healthy food, supplemental medical care, adequate accommodation and recreational opportunities. Participants were aware that poor health not only impacts them individually but also has societal costs, which the government ends up paying for.

*Most of the newcomers are economically not sound. Obviously, they seek for cheaper shelter facilities like kitchen without exhaust fan, compromising health repercussion. ...To fall sick is stressful: financially, physically, and psychologically. Sickness causes inability to work and it will affect their income status. Moreover, when people become sick, the government has to spend more money in health sector...and government will not get tax as the person becomes unable to work.*

*[The closed pool] is a major problem for the people in the community who don't have money [to go outside the community to a pool]. This stops the children in the community from having the opportunity or benefit to learn the skill of swimming.*



*I rarely see many cigarette ends within blooming flowers [on the university campus]; however, in St. James Town, I have seen many cigarettes ends within blooming flowers. ...When people have mental problems and are poor, they smoke.*



The question was raised as to whether acceptable standards for a healthy living environment differ between neighbourhoods of different socio-economic standing, if this is equitable and if in fact, it violates basic human rights in our democratic society.

*Public officials may not see the apartment buildings around the garbage dump as a detrimental concern because those who reside there are considered low-income renters. Could it be that if higher income families occupied these buildings such a health hazard would not be present?*



### **Ic. Social Supports**

SJT residents' health and wellbeing is directly affected by what social programs and services are available in the neighbourhood. Residents appreciated existing programs that bring community members together and allow them to take control of and participate in the things they value, such as educating their children.

*[The after school program] managed to operate with zero funding except for the snack paid by the parents. ...This program creates friendship and unity within the children and parents because it allows both parties to participate and make decision over the children's activities in the centre.*

Residents were concerned about a perceived lack of social programs for community members with special needs, such as single parents and children with disabilities, who may need additional financial assistance to live well.



*Aria, six years old has been in and out of the hospital more than any children in Canada. Aria's mother is a single mom, who had a hard time finding job due to her physical deformity. They need financial assistance for them to live a better life.*

Participants were very concerned about the wellbeing of the homeless and people with mental health issues, both in SJT and in the wider Toronto community. They expressed surprise at seeing homeless people in a wealthy city like Toronto, and therefore questioned the effectiveness and depth of existing programs.



*In this city of Toronto, the city rich in resources, a city exploding with new construction of condominiums, we find the homeless and hungry. How can we explain the large numbers of homeless and hungry people living on our streets? ... We may not be aware that we pay a hefty price in community services and hospital cost for the homeless- your tax dollars at work. ... We need to engage our leader in dialogue about the plight of the homeless. ... We must do something about it NOW.*



*For most who refuse to deal with agencies or use the facilities provided for them, they fly under the radar of various social programs. Most would rather do this than be subjected to the problems of the facilities themselves or the scrutiny of the programs.*



*I know that [the] government have spent a lot of money to help those kinds of people very well but still some people are doing their way. ... I don't think that they need only money. [There is a homeless man lying on the floor of this ATM location].*

## II. Place Based Factors

Place based factors include the location, quality and accessibility of the physical amenities of the SJT neighbourhood. Overall, there was a consensus that there are many physical assets in the SJT neighbourhood that are utilized and contribute to the physical and mental health of residents. However, there were issues concerning the maintenance and appearance of these amenities as well as concern over the negative perception of the neighbourhood by people living outside of St. James Town. The sub-themes that emerged are: IIa) Location of the Neighbourhood; IIb) Buildings and Apartments; IIc) Places for Physical Activity and Socialization; IId) Neighbourhood Amenities; and IIe) Sanitation and Maintenance.

### IIa. Location of Neighbourhood

The location of SJT in downtown Toronto, within walking distance of many of the services and amenities regularly used by residents and very close to reliable public transportation, was seen as a very positive aspect of the neighbourhood. Accessibility to resources was important to participants as it contributes to wellbeing by reducing stress, encouraging physical activity through walking, and helps participants save money on transportation. These views are captured below.

*This is a community that many choose to make as their homes because of its convenience. There is easy access to the grocery stores, childcare, schools, community centers and more importantly minutes away from the subway.*

*SJT is a convenient area. You can walk, to go to Eaton's Centre. We're close to downtown. When you don't have money, you can walk to different places.*



*I feel that St. James Town is a prime location in Toronto. There are subway and bus services all around the neighbourhood.*

### IIb. Buildings and Apartments

Participants expressed considerable concern about the deteriorating condition of the high-rise apartment buildings that house North SJT residents. The eighteen high-rises within the neighbourhood are all rental accommodation. Residents are trying hard to make a living and many of them are supporting a family on a low income and do not have the option of moving to somewhere else in the city, even if they are not satisfied with their accommodations. There are few places like St. James Town where rents are still reasonably affordable for a downtown



neighbourhood, but unfortunately, it comes at the high cost of living in unsafe and unsanitary conditions. Poor living conditions contribute to poor health in a number of ways. Overcrowding, vermin, proximity to garbage dumpsters and lack of cleanliness on building property is stressful and can increase the risk of disease as illustrated by this quote: *these apartments are in high demand as families crowd together in these limited housing units. ...These overcrowded spaces lead to poor hygienic conditions as many residents complain of bedbugs, cockroaches, rats and rodents invading their apartments.*

*For many residents their balconies are either overlooking the garbage or are located directly above it. ...In the summer, the scent...may easily travel into residents' apartments and neighbouring areas such as parks. ...This is an unhealthy environment for children... due to the fact that they would be exposed to rodents, germs and other possible toxic substances. ...Moreover, because this area does not appear to be well maintained, many bugs, insects and rodents such as mice and roaches may infest or be harboured within this open space. These bugs, insects and rodents may travel to surrounding areas, taking many diseases with them.*

There were also many concerns about physical safety, primarily for children in the high-rise buildings as a result of inadequate repairs and the lack of safety features in the buildings, as well as from risky behaviours of other residents. These safety issues not only affect physical health; residents also experienced fear as a result, as voiced by this participant: *high-rise buildings are scary to live in because of the safety concerns.*

*There is not a single day that all of the elevators are working. ...You can just imagine how this problem affects our health with so many seniors living in this building. ...If you were to ask the people living in the building, nearly 90% will prefer to have the elevators fixed than any other renovations taking place in the building.*



*It's hard to put a child lock [in the door] by yourself unless a professional comes to... do it. When we heard the news of a child falling out of a building, it's scary. We have to have the child locks.*

*Most of the apartments in this neighbourhood are not installed with kitchen exhaust fans. ...When people use cooking stoves to cook their foods, series of toxic gases emitted. .. If these gases do not get outlet to go out, they remain in the room causing bad effect to our health. Diseases like asthma and respiratory problems can be inflexed to residents. At the same time, high humidity can cause growth of mould, which also affects our health.*



Another concern expressed was the close proximity of the buildings, which reduces the amount of common and green space available to residents.

*The other problem with the buildings in such close proximity is that they take up a lot of the land space. St. James Town can be beautified with more green space that is not available because the buildings take up most of the space.*



Despite these issues, many of the residents appreciated the wonderful view provided by some of the high-rise apartments, which contributes to good mental health.

*This view makes me feel relaxed and happy. In the evening when the sun is setting it is a good time to have tea or coffee with my friend. ...We feel relaxed and we would talk about how to enjoy life. ... I like this community because it's a very good place to buy something and close to the subway, but I like the view the most.*



### **IIC. Places for Physical Activity and Socialization**

Parks are the main recreational amenity in the neighbourhood and therefore play an important role in the lives of SJT residents. Green space was also seen as an “escape” where residents can relax and socialize, which are important activities for good emotional health. The participants

spoke about the importance of beautiful places to enjoy, places to be active and relieve stress. Thus, the condition of SJT parks was important to the physical and emotional wellbeing of SJT residents. Participants expressed dissatisfaction with the number and quality of parks in SJT, saying they tend to be dirty, unsafe and poorly maintained as expressed by this participant's quote: *the playground area is very, very dirty with broken glass, needles, and other kinds of litter.*



*This park is also a place where you will meet other people and gain friends with same or different backgrounds and cultures. ...This is one of the important places in a community. Important because this is where gatherings, socialization, relaxation and entertainment take place. ...Most of people of different ages from babies to an old ones, you've seen them in the park.*



*The park I have is dry, with lots of litter, not well maintained, and does not show care.*



*The grasslands are become yellow because... nobody cares about it and people step on it. ... Imagine all around us only buildings and hard roads, our hearts are broken already. There is neither good lawn nor great trees. ...Seniors and kids cannot go too far to the park enjoy the life every day. If we have a good environment in our community, it would be great for them.*



*Another issue is that there are no water fountains. We need water in the playground. Children tend to go steal popsicles from the corner store, probably because they are thirsty and don't want to go all the way home to get a drink. They need hydration. We would appreciate it if they would put one water fountain in St. James Town. In Cabbagetown they have, so why not St. James Town? Also, I would like to see more swings in the playgrounds of St. James Town. In the whole of St. James Town, there are only two.*

The waterfall near Food Basics was an exception; this is an area of the community that residents found beautiful and well-maintained. Participants also wrote positively about the Wellesley Community Centre and Library, noting the positive impact that a new, beautiful building can have on the emotional health and wellbeing of community residents. These assets also contribute to the positive image of the St. James Town neighbourhood.



*This is a soothing sight for tired eyes as the beautiful flowers provide an effective distraction from the barren concrete jungle around. The water cascading down the rocks and stones provide a welcome change of mood- from the monotony of the constant flow of traffic.*



*This building is a newly renovated library. Its space and architecture is a pleasant addition to this community. ...The open space and the lighting of this structure add a sense of relaxation.*

## **IId. Neighbourhood Amenities**

There are many amenities in the neighbourhood that were recognized as assets by the participants. These include community organizations, health care facilities, transportation options and other services.



## I. Community Organizations

The existence of community organizations in SJT was seen as a neighbourhood strength that positively impacts the health and wellbeing of community residents by addressing social determinants of health through connecting people to employment as well as helping people build social networks and supports in a new country. Participants recognized the contributions to residents' health and wellbeing of larger organizations like the Wellesley Community Centre, the Employment Resource Centre and the Wellesley Institute, as well as grassroots organizations such as the 519 Church Street Community Centre and Community Matters Toronto.

*Since the library has opened in such a close location now more frequent trips are possible. ...Most people in the neighbourhood cannot afford the expensive monthly memberships of private fitness clubs. The community centre has opened up opportunities for so many children that are deprived of a proper facility to play sports like basketball and soccer especially during the cold and brutal winters of Toronto.*



*Employment Resources Centre, located along side of Parliament Street has been trying to ease out the unemployment problem, the major problem of this neighbourhood. Whereas the Wellesley Institute has been seriously involving in transferring skills to empower the community members of St. James Town.*



*For many immigrants, homosexuality is not socially, morally or religiously accepted by a number of cultures; that is why so many gay/lesbians suffer in silence. The 519 Church Street Community Centre provides support for those who cannot speak to parents, religious leaders or friends about their sexual orientation. ...I believe that the 519 Church Street Community Centre plays a vital role in suicide prevention in this community.*



*This is such a strength having Community Matters in our neighbourhood. This is like a big resource centre and if they do not have answers to people's problems then they will guide to people who would know. ...This is so vigorous to the community because most if not all the programs that are run there is free of charge.*



*Casey House is located at Huntley Street and provides free services to members of the community regardless of race or financial status.*

## II. Health

Easy and equitable access to health care is important to SJT residents. The participants appreciated the health care services that are right in the SJT neighbourhood because of the peace of mind they received from knowing those services are quickly and easily accessible when they need them. Easy access to health services is very important to mental wellbeing, as is evident in concerns expressed about the loss of nearby emergency services when the Wellesley Hospital was closed as illustrated by this quote: *when we lost the Wellesley Hospital, at least we were expecting that part of the place would be emergency for when people get hurt.*

*This centre has been extending primary health services to the community members of this community. Availability of such organizations within the vicinity of the neighbourhood will certainly increase the feeling of safety among the community members. ...The easy access of facilities assures people about their safety in regards to health. ...Because people can have quick access of health services during their time of need. And timely consultation with health personnel and treatment will certainly prevent the situation being deteriorated.*

### III. Transportation

Participants were very happy with the public transportation services available in SJT and in Toronto. Access to good public transportation reduces stress and saves money. It was emphasized that it is important that Toronto Transit Commission (TTC) information be available in many languages and formats to make it accessible to new immigrants.

*Easy access to transportation in St. James Town makes getting to school, work, and other places less difficult than if you live in the outskirts of the city. This can promote good health by reducing stress. Not having to worry about transportation can save money and time. I feel that knowledge about public transportation is essential to living in a city like Toronto. Since St. James Town is populated mostly by immigrants, this information needs to be readily available and accessible to them.*

Residents also appreciated the environmental benefits of the TTC, though they are concerned that increasing fares will ultimately make public transit less beneficial to residents.



*We like our TTC; it is a big benefit to people and our environment. ...We can take TTC everywhere without parking problems and driving problems. Second of all, it is save energy, more people take TTC less people drive, the energy will be saved in this way, obviously, it will have less traffic and less pollution. TTC budget will be cut a huge number; the fair is raised again and again. Some services will be cut as well. If like that it will not convenient at all.*

### IV. Food

Food is an important aspect of physical and emotional health. Many SJT residents live within tight financial constraints. Nevertheless, they expressed concern about the quality of food available to them and their families because it contributes to their health. Participants wanted to ensure that supermarkets supplied quality, not just inexpensive food.

*Almost all the people of St. James Town community buy daily food from the two supermarkets...I believe that most of community resident find putrescent food or other similar stuff, for example putrescent vegetable, expired milk, refrigerated ice-cream after the power is off for one-day. Can we trust supplied food from supermarket? ...We are not only care about the price of goods, but we pay more attention to our healthy.*



## **Ile. Sanitation and Maintenance**

Participants had many concerns about the aesthetics of the neighbourhood and the general physical condition of SJT. Garbage was a serious health issue for many participants. It is unsanitary, attracts pests, spreads unpleasant odour, and makes the neighbourhood unsightly, thus negatively impacts both physical and emotional health. One participant's aggravation is highlighted in this quote: *this garbage bin is constantly overflowing with junk to the extent that anywhere within 2 or 3 metres of it is also piled with bottles and cans and waste paper.*

*The food on the ground [put out for the pigeons] could also attract other diseased animals like rats, which can then get into the surrounding buildings and live in people's homes.*



*We, as a tenant community, pay a lot of money to our land lords. It is not a privilege, but an absolute right that we get well maintained parks, spaces and environment around the property. ...It would not take a scientist or a medical doctor to understand the risks of a pigeon carcass lying down on a public space. This particular one had been out on the park for several days.*



*It is also necessary to cover the garbage container, flies and mosquitoes does not fly and do not spread the disease.*



*There needs to be action taken to improve the environment of St. James Town such as sanitation or employment of garbage collectors to assist with the collection of dirt within St. James Town.*



Residents would also like to see more garbage containers, as they feel this would help to solve SJT's litter problem.

*People are living crowded and the garbage fills quickly in the cans and by wind blow everywhere. For this, we can put more cans out of apartment, public buildings, parks, and play ground.*

Although many residents come from countries without formal recycling programs, many are concerned about the environment and embraced the recycling program in Toronto. Participants reported that recycling is not functioning as well as it could in SJT, as apartment buildings are not outfitted with proper recycling collection facilities, and there are no recycling containers in public places.



*In the St. James Town neighbourhood, there is not one single recycling bin of any kind on the streets or sidewalks. This means that all sorts of recyclable garbage a pedestrian may have – such as a pop can or newspaper – will end up in the garbage. In the short term, this causes overflowing garbage cans and a negative neighbourhood image. In the long run and in the big picture, this means more money spent on hauling unnecessary garbage to landfills and a damaging impact to the environment.*

Participants were dissatisfied with the lack of maintenance of needed amenities such as bicycle racks and did not appreciate the haphazard appearance of many areas in the neighbourhood. It was emphasised that the lack of maintenance and respect for these common spaces contributed to more littering and rampant theft and vandalism.



*For the majority of residents who do not have a car but instead rely on bicycles, there are not even 5 well-maintained bike racks. ...The end result is that most bicycle owners have no choice but to lock their bike onto anything, anywhere.*



*When I moved to Toronto, I was surprised to see so many broken bicycles. Some people take their bicycles into their apartments because they don't want them to be stolen. I think that our neighbourhood needs to have special bicycle rooms or sheds in each building. Maybe, even a monitor to prevent stealing. Also, for the [remaining] parts of [stolen] bicycles that are left, there could be some sort of recycling program.*

In general, there were feelings that SJT is not well-maintained, and that this has a negative impact on the residents' state of mind. For example, one participant said: *the neighbourhood surroundings are showing neglect. My concern is that this neglect is transmitted to the feelings of the people who live there.*

*St. James Town is...starving for the soul that a well-cared-for common space would create.*

A waterfall constructed close to Wellesley Street was seen as one of few positive physical features of the neighbourhood. It was greatly appreciated for its contribution to feelings of wellbeing in residents, and is seen as a benchmark for the rest of the neighbourhood.



*This is a positive thing in St. James Town. It is good to look at and makes the residents feel good about their neighbourhood. ...I think the time and effort that goes into maintaining this waterfall and the surrounding area should also go into the rest of St. James Town as well.*

### **III. Behaviour and Attitudes of Individuals and the Community**

Many of the participants highlighted the assets and characteristics in the neighbourhood that they believe positively or negatively impact their health alongside very strong messages that people and their actions matter. In a neighbourhood where people face daily challenges and there are many issues that affect health and wellbeing, participants felt that it was within individual's power to change behaviours to make the SJT neighbourhood a better place. This included raising knowledge and awareness as well as taking responsibility and ownership over the social and physical environment. The two sub-themes that emerged are: IIIa) Knowledge and Awareness and IIIb) Responsibility and Ownership of Residents.

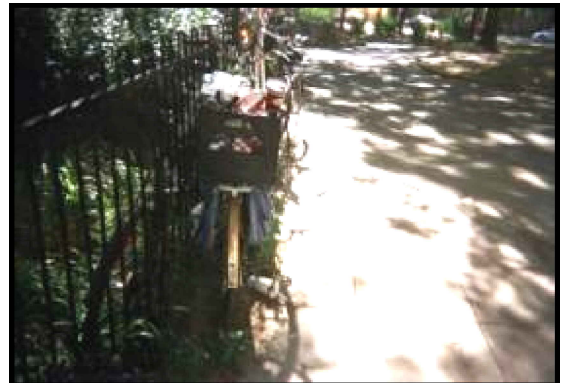
### IIIa. Knowledge and Awareness

Participants believed that increasing the knowledge and awareness of residents about how issues in the neighbourhood affect health and how they can be challenged are an indispensable part of the solutions to specific concerns. Participants highlighted that it is challenging addressing issues in a neighbourhood where many people are newcomers and are from diverse backgrounds and may not be fully aware of civic responsibilities. There was consensus that SJT residents needed to be aware of how actions such as littering, disposing dangerous materials inappropriately and feeding the pigeons was impacting the neighbourhood, both by creating unsafe and unhealthy spaces as well as perpetrating the negative image of the neighbourhood. By raising collective awareness, participants believed there could be appropriate action taken, even on a one to one level.

*We also need to pay attention how to beautify our inner life, which needs community to do environmental training for new comers and lower or uneducated people, who live there and don't know how environment importantly related to our everyday life, and also related to our future generation.*

*In the school area, teachers must guide and teach children. [They] have to learn to pick up the garbage to make a clean environment by themselves and form good habits from [when they are] little.*

*It would be good to have an awareness program regarding how we make our community clean. ...We have to also inform the community people about the garbage ...how it spreads disease if we do not put garbage in the right place and [in the] proper way.*



*People need to be reminded because people are forgetting how to take care of themselves and their area. ...We should have a public meeting in the area and ask everybody to join. ...We should get all people together and tell them to please "wake up" and solve this problem.*



*One day while I was walking in the neighbourhood, a lighted cigarette fell a couple inches from my shoulder. ... Some people have told me of glass and bottles falling near them. ...People could become injured by these falling objects.*



It was acknowledged that by spreading information about individual's rights and responsibilities, community resources and opportunities, it is possible to strengthen the community and improve the mental and physical wellbeing of residents. Knowledge and awareness were voiced as tools by participants, ways to encourage supportive and respectful behaviour as well as to empower individuals to advocate for their own needs. It was believed that by increasing information and awareness, individuals may be better able to make informed decisions about their actions in consideration of their fellow residents and their own health and wellbeing.

*The tenants should voice about [the lack of kitchen exhaust fans]. At the same time, most of the tenants are not aware about this problem. So they are unknowingly becoming the prey of this problem.*

Participants also felt that community members need to be aware not only of problems, but also of community strengths. This awareness could strengthen the community by increasing pride and ownership and hopefully lead to increased feelings of responsibility and actions by community members.

*In order to enhance the strength, the community should be able create awareness about the facilities available in the community.*

*I feel like this community either does not know its strengths or they fail to recognize them. Now this to me seems to be a problem. The residents will know the ad is a misrepresentation. I just hope that after they realize this, they feel something. Anything, whether it is disgust, anger, or humour. Anything that will prompt them into making change, whatever way they can.*





### IIIb. Responsibility and Ownership of Residents

Many participants believed that a number of their concerns about SJT are in part the responsibility of community members. The responsibility for the upkeep and hygiene of the neighbourhood was an issue that participants felt that residents needed to take more responsibility for as demonstrated by this quote: *it is our responsibility to clean our community rather than making a mess.*



*The picture indicates to me that whoever is leaving the bag in the chute room is too lazy to take the bag to the larger bins available for the building. The other thing it tells me is that this person is also too lazy to separate their garbage from...items that could be recycled.*



*People should also throw their garbage in proper containers because animals always come and bite at the garbage and they spread all of the germs. This problem exists because I think people don't care. They have to care about each other and each other's health.*



*So many cigarette ends have been thrown around the benches in the park, even though dustbin located a few step far. ...**It is not only related to health, but it also influences next generation behaviours** [Participant's emphasis].*



*You could see an example of lack of willingness to make sure that the environment of St. James Town is well kept clean from the inside the telephone booth in the picture. ...The authority had to be asking to come with solutions along with residents.*

There is a need for the community's support of initiatives such as after school programs as well as the need for advocacy to higher authorities for programs and facilities. Participants identified that there must be a strong willingness and commitment to working with authorities to solve problems, and, generally, for showing sufficient care for common spaces and for other residents.

*At the same time, community members should voice for the need of other facilities and form a pressure group to get needed programs in the community.*



*This [after school] program requires space and money. The support of local leaders and residents in this community is needed in making this program a success.*

It was pointed out, however, that community members cannot take responsible actions without additional support in the form of adequate programs and facilities. Feeling ownership for the community was very important to the participants in the hopes of motivating residents to take responsibility for their neighbourhood. But, there were several barriers to feelings of ownership in SJT, for example the neighbourhood is one hundred percent rental accommodation.

*Most importantly, the people of the neighbourhood themselves have to take ownership of the place they live and make a conscious effort to keep their environment clean as well.*

*I feel if people have a bit more pride in their neighbourhood, they would not like to see litter on the sides of the buildings.*



*In the picture, we see a bench, but it doesn't have seat. It has been without seat since last year summer. ...Our community's prestige is linked to this park. If such resources are not maintained well, we cannot be proud of anything.*

*Can we have any room for us to be proud of our community? ...This [dog excrement] can be the root cause of various diseases and epidemics. Therefore, I have a strong feeling that had the dog owners been responsible and fully aware about their social ethics, such unpleasant scenes wouldn't have taken place. ...We have to always bear in mind that it is our community and we are responsible for our community.*

The participants believed that both the authorities and residents can contribute to the feelings of pride and ownership in the neighbourhood. Several participants noted the construction of new buildings and facilities that are admired not only by residents but also by people living outside the neighbourhood. It was also highlighted by participants that individuals can increase pride by being involved in the beautification of common spaces.

*Although the residents do not own this land, neither do they feel a sense of ownership. This feeling of ownership comes from involvement, activity, sharing and creating with and for each other. The solution is internal and not externally given.*



*First and foremost, such a beautiful building really brightens up the look of the neighbourhood that is essentially a mushrooming jungle of dull and decrepit architecture. ... Finally, we have something in our neighbourhood that we can flaunt with pride beyond the borders of our neighbourhood.*



*In this picture, the efforts of one person to transform this environment is seen... even if it takes a long time for the idea to take root, eventually, people may see that there is an appropriate response to their situation, and choose to expand on the beauty of living things in their space.*

#### **IV. Social and Community Values**

Many of the participants connected their health and wellbeing to the importance of social and community values. These were described and understood as the underlying forces that connected people through opportunities to share experiences, information and resources. General values are those that united individuals, regardless of their ethnic background and geographic location. Participants also highlighted the importance of involvement in the community and society. Social networks and support were noted as playing an integral role in the health and wellbeing of the participants. The three key sub-themes that emerged are: IVa) General Values; IVb) Participation in the Community and Society; and IVc) Social Networks and Supports.

##### **IVa. General Values**

Understanding the values of a community is important to improving that community's health. Participants described a wide range of values that are important to SJT residents. These values included the education and development of children in the community, availability of green space for socialization and recreation, well-maintained and safe living spaces, diversity, and the availability of safe places to express sexuality.

*When these children grow up what will they say? What will they do? Does it matter to you? If it doesn't, turn and walk away. If it does, do something now [about the quality of education]!*



*Literacy is one of the cornerstones for the wellbeing of a neighbourhood because literate and educated children will be more successful in having respectable and fruitful careers in the larger Canadian society.*



*As we all know that our city is growing, our green is losing. ... It is easy to take the green out of the city; it is hard to get it back.*



*Therefore, this place is a busy place at almost every time. People come here for relaxation, walking, and leisure talk with each other. Children keep themselves busy in playing at the play park whereas most of the adults like to sit on the bench and share their feelings and experiences with each other. These activities give them good relief after the day long hard toil. It is obvious that everybody needs good rest, relief and happiness to keep oneself healthy and comfortable.*

*Since residents live in such crowded apartments they should have easy access to outdoor facility which will serve to promote motor skills and encourage them to socialize in the outdoor location.*

*This parade creates a safe space to engage in the celebration of their sexuality. ...They encourage the diversity of the community to participate in events and facilitate community development.*



#### **IVb. Participation in the Community and Society**

It was strongly noted that having opportunities to participate constructively in the community and in the wider Canadian society is very important to the emotional health and wellbeing of SJT residents. This was expressed as being especially true for newcomers because they are trying to learn, adapt and integrate into a new country. Involvement in the community helps individuals understand the nuances of Canadian society while learning valuable language skills and building relationships. Participants highlighted the importance of being a citizen, not just as an individual who has gained Canadian citizenship, but as a member of society who participates and gives back to the community. The barriers to achieving this status, to be given the rights as well as the responsibilities of a Canadian citizen were mentioned and the ability of newcomers to fully

participate in society were questioned. Individuals want to give back, but they also need to be given access to the same opportunities, supports and quality of life that Canadian born residents enjoy.

*The goal is to realize that people should not merely exist in St James Town; rather, it is to discover that they truly yearn, whether they are aware of it or not, to be involved citizens of the place they call home. ...What the community needs is for someone...provides the resources to enhance their capacity to participate in Canadian society in ways that can be seen and felt, because, after all, they do strive to be a part of their new country and to make meaningful lifelong contributions to Canadian society.*



*Each flower represents people from different places. And the vase represents this country. ... If people of different background are given opportunities here by just accepting their background and giving a chance of their capabilities then everything turns well... [and] it turns out to be a beautiful and attractive arrangement.*

Participants wrote about the need for all members of the community, from children to seniors, to feel that they are significant, contributing, cared-for members of the community and society.

#### **IVc. Social Networks and Supports**

Social networks and supports were outlined as an invaluable resource, especially for newcomers. Building positive relationships and sharing experiences with people in the community was highlighted as an effective and powerful way to deal with the transitions and adjustments individuals face as they adapt to living in a new country. Through social networks residents connect and support each other by offering emotional support as well as practical advice, access to resources and integration into wider social networks. These are all very important supports which were noted as helping people maintain positive outlooks and good mental and emotional health.

*The cultures that make up St James Town are familiar with building social capital and not financial wealth. People are used to meeting and caring for their neighbours and extended families in their countries of origin. In this colder climate they are also greeted with a colder social climate where the physical settings do not give them the same opportunities that they had sitting on their front porches and talking to the community as it flows by their door. In this country, the high-rise apartment space needs to be softened by a lush park setting where people can break down the isolation that the wall of their apartments imposes... Like the squirrel, isolated and depressed people deteriorate and develop sickness and become a liability to the health system – at great social cost.*

*Though these individuals live separate lives, the fact of the matter is that there is some degree of homogeneity and social cohesion. ... St. James Town residents can relate to one another. That is because many residents are immigrants. These residents are coming from similar situations and for similar reasons. This creates a bond.*



*[The Tsismis Tree- “Gossip Tree”] is a place where you can vent out your problems informally, share experiences and support each other. ...It is a place that is treasured by the immigrants.*



Due to the importance of socialization to good health and the small size of apartments, participants emphasize the need for quality common spaces, especially parks, where residents, young and old, can come together.

*The way the pool and the playground relate to our lives is the enjoyment time with friends and families. The apartments are too small to have everyone over so we need to go outside.*



*We may not have lots of money, but we have each other. Parks and public spaces contribute to the social wealth. ...A park is where people can go sit together, talk, enjoy, and laugh and share the differences they have. It is where I can go when I am old, or where I take my children to play, or where I go to meet people to chat and to make friends – to celebrate life and community. I expect greenery, good*

*chairs, and well maintained surroundings. I would love to be able to come out of my house to meet people rather than be confined to four walls in isolation.*

*In a residential building, the addition of a green space adds to the attractiveness of the property and provides tenants with a place to enjoy themselves with their families or to sit and chat with friends and neighbours. The addition of green space to a building can provide a sense of community to a building since tenants can get to know one another as they enjoy this space together. [An example given from nearby park].*



Regret was expressed when opportunities for socialization and getting to know neighbours are not appreciated and used; for example, when waiting at the bus stop.

*There are many people standing there, but there are so less communication going on between them. Each person standing there has a newspaper in their hand, and some has a mp3 in their ears some are talking on the cell phone. ...Since we all live in the neighbourhood, we should all might as well get to know one another!!!*



## **V. State of Mind of Community Members**

The state of mind of community members was a concern for many of the participants. Individuals expressed anxiety over a number of the social and physical features of the neighbourhood that they felt negatively impacted the mental health and wellbeing of SJT residents. There was fear instigated by negative occurrences in the area, a number of ongoing safety concerns and a pervasive feeling of powerlessness in regards to action on these issues. There was also concern over the challenges that affect newcomers to Canada and the impact these have on health. In addition to these issues, participants spoke about the effects that the stigmatization of the neighbourhood can have on the health of residents. The four sub-themes that emerged are: Va) Safety; Vb) Fear and Powerlessness; Vc) Newcomer Issues; and Vd) Community Image.

### **Va. Safety**

Participants reported feeling fear in a number of contexts. Safety in SJT was a major concern, especially in the neighbourhood at night. There were specific areas that people did not travel to or from alone. In particular, they were concerned about the poorly lit tunnel by the entrance to



Sherbourne subway station. There were hopes that the safety in the neighbourhood would improve with ongoing developments happening in the area as demonstrated by this quote: *close to St. James Town, there are new condominiums being made. One thing of value is maybe the security of the area will increase.*



*A few years ago this very entrance was a site for a crime investigation. Having the fear of crime lurking around may create anxiety for many. ...This sense of panic and fear of danger could eventually put a toll on one's health. ...This area is not the only area that can be seen as a source of poor lighting there are many pockets within this community that is surrounded by shady areas but lacks a source of lighting. A simple corrective factor such as lighting is vital to keeping an area safe and offering a sense of securing to those dwelling in any given community.*



*A lot of people say don't pass or never to walk alone on that place. ...If only they can assign police officers regularly to patrol or to post during night time, at least people might feel secure and safe on their way home. ...[The] other thing is, maybe it will lessen any illegal activities happening at night.*

Generally, residents are happy with the local school. However, there was concern about how the safety of the neighbourhood affects safety in the schools, suggesting that the importance of security to community residents reaches beyond simply reducing their fear of walking after dark.



*In a neighbourhood where a lot of gang plays, and crime and other bad things happen and if a school is located in the middle of everything would that be a safe place to send your child? Most likely no, so even if the school [looks] pleasing to the eye, the neighbourhood that surrounds the school also plays a major role.*

Participants were also concerned about the safety of their belongings. As bicycles are a primary form of transport for many residents, bicycle theft is a serious concern that can have a major impact on the emotional health of residents. People felt that there should be secured areas in buildings to prevent bicycle theft.



*Broken bicycles are everywhere. The thieves [have chosen the parts] that they want. I think one of the idea is to build an own bicycle rooms in each building.*

#### **Vb. Fear and Powerlessness**

Residents reported feeling fearful and powerless in the face of changes they would like made. Many felt as though they are not heard by authorities at all levels, from building managers to government officials. Some SJT residents expressed that people are afraid to complain to the management of their buildings about maintenance problems because they are afraid of being evicted and if they do complain, they are not heard and nothing is done.

*Some of the residents are afraid to complain of poor maintenance of the facilities to the management because of their innermost fear of eviction.*

*I talked to the manager and he said they would fix it. But still I am waiting for 3 weeks. And there is no paper to say that I complained, it's spoken. No record.*



*Unfortunately their plea for help went unheeded and they were buried in a overwhelming wave of 'that's not our problem.'*

Some SJT residents expressed that they feel powerless to effect the changes they want to see in the neighbourhood. They felt that people with the authority to make positive changes were not listening.

*When we had election, we told them that we need affordable housing. We don't need condominiums. They did not listen.*

*The park is a public space, so people bring their leftovers and feed the pigeons and we cannot do anything about this. Who can do something about it? No one.*

### **Vc. Newcomer Issues**

More than half of SJT residents are newcomers to Canada. As a result, the unique challenges that new immigrants face are important factors in determining the health of SJT residents. Many newcomers come to Canada with high hopes for better opportunities, but they know that it will likely not be their generation, but the next that will benefit. This can put a lot of pressure on first generation Canadians to succeed and may increase the stress they feel because of normal future uncertainties.



*Canada had it all. It was the perfect place to nurture and raise kids. It is a country of peace and security. It was in St. James Town I began my one way journey to what my parents were seeking, success. [It is] a path where its direction is certain yet its end isn't.*

For many newcomers, the inability to communicate well in English is a major frustration that takes its toll on their wellbeing. An inability to communicate impedes an individual's ability to communicate when their health is being affected by issues such as maintenance problems in apartment buildings. Individuals may also experience frustration and emotional strain from being constantly misunderstood and feel like their voices are not being heard.

*Adjustments are so hard to do especially if you don't know how to communicate.*

*Many of the residents here are struggling to survive on minimum wages and a number of them cannot speak English fluently. As a result they cannot communicate their frustrations effectively.*

Participants expressed that it can also be stressful to adjust to a new country with a different culture and different norms and freedoms.



*The parade is a good thing because of the freedom it represents. ...However, for me I cannot understand why women have such little clothing on. ...Canada allows a lot of freedom to do anything. ... If I think it is wrong it would make no difference because that is the way it is in Canada. It's something that I am just not used to.*

Participants identified that newcomers can feel isolated and depressed in a culture that places less emphasis on social networking and community than their home culture. This can be very detrimental to the health of new immigrants. The impact of this are felt not just at the level of the individual, but at the level of society. Living in a community like SGT with other newcomers having similar experiences can break down this isolation.

Besides the opportunity to share experiences with other immigrants, there are other aspects of the SGT neighbourhood that were identified that can ease the transition of newcomers. The fruit stand provides access to familiar foods, as well as a shopping experience that is closer to the market shopping experiences that many newcomers are familiar with.



*Food is very important for new immigrants. It is a source of strength in being alone or isolated in a new place. Even if a person has fully adapted to a new system and environment, once the stomach gets a taste of his or her original food, the feeling is great.*

Some residents perceived life as a struggle. It is not easy to come to Canada as a new immigrant; this shapes the outlook of SGT residents. Some residents were not optimistic that life will live up to the expectations they had about what it would be like to live in Canada.

*In my perception it is not a flocking, but a struggle for survival. ...Several pigeons flocked in a moment, hustled and bustled and struggled just for this water. ...What we can understand is that life is not easy. It is full of struggle, joy and sorrow. Everything has to struggle for the sake of existence and survival.*





*In this wasteland of no opportunities it's the only chance of 'winning.' Become a part of the Canadian dream. ... It's always the deserving who win. Imagine the freedom! You can't afford not to play. What else is there?*

### **Vd. Community Image**

The image of a community, both in the eyes of residents and the eyes of outsiders, is important to the health and wellbeing of those who live in the community. Participants expressed that they do not feel good about living in a dirty, uncared for, disorganized community. These issues can negatively impact emotional health and wellbeing of residents.

*It is sad too that people on the outside have a negative stigma attached to this area as they dismiss it as drug and crime related and associate it as being run because it is infiltrated with poverty stricken foreigners.*

The participants expressed concern over how outsiders perceive their community and the negative stereotypes and stigmas that are reinforced when the community appears poorly kept.

*The scattered bikes give people the impression of a messy and disoriented community.*



*People who come to St. James Town first time [will] think this area is not a safety living place. [This broken mirror is on a public pathway].*



*The other problem with littering and garbage everywhere in the streets of SJT is that it makes the neighbourhood look disgusting, dirty and ugly. It also leaves an awful smell that is not good for people walking by. I think this is one of the reasons that gives St. James Town a bad reputation.*



*I don't think anybody enjoys living surrounded by garbage and rotten organic waste. On a hot summer day, one can actually smell the rotten stench of the garbage inside the apartments. People in this neighbourhood already have a lot to worry about. The sight of putrid garbage and awful stench just adds more mental stress. If the environment of a community is polluted, people's sense of civic pride and belonging is lost. At the end of the day, no one wants to be part of a community that smells.*

Residents identified that they felt better when their community looks good and is welcoming to visitors.

*It is also a welcome sign to all visitors to the apartment units located within this vicinity. More of this type of beautification projects should be encouraged in our neighbourhood as it will provide a sense of pride in our community.*

*The beauty of this structure could be further interpreted as adding a modern, uplifted view to the community. This may serve to curb stereotypical ideas of St. James Town being a grim place with inadequately maintained places and buildings.*



## 5. Discussion

The results explored through the photographs and stories of participants show the multitude of neighbourhood factors that are experienced at the community level that influence the health and wellbeing of St. James Town residents. These physical, economic, cultural and social (SDOH) variables affect individuals' capacity to meet their own needs through the creation of opportunities and/or barriers to achieving good physical and mental health and wellbeing in the course of daily life. The concept of health as "the state of complete physical, mental and social wellbeing, and not simply a lack of disease" (WHO) was elaborated on in different ways by participants. Their perception of health encompassed the physical characteristics of the neighbourhood, social networks, expectations of individuals and society in general, values and goals as well as individual's state of mind. It is apparent from the themes that were highlighted that there are many processes at work in St. James Town, factors that interact in a multitude of ways and at different scales that are positively and negatively influencing health and wellbeing of newcomer residents.

The importance of macro-structural factors was an over arching theme, the influence of the broader political, economic and social climate in the neighbourhood was felt, with many participants feeling powerless to address the problems that were believed to be ingrained in issues beyond the boundaries of the neighbourhood. It was believed that there had to be involvement of higher authorities, of all levels of government, to address concerns such as economic barriers. The results indicate that in order to support and maintain the physical, mental and emotional health of SJT residents, intersectoral actions are necessary to coordinate efforts to ensure that the problems that exist are not plastered over, that the root causes of the neighbourhood issues are addressed to improve the quality of life of all residents in the neighbourhood and beyond.

The SJT neighbourhood is a complex environment. The opportunities and challenges in the area as explored by participants in this project are interrelated. For example: the location of the SJT neighbourhood, close to many of the amenities in downtown Toronto, is an asset but many of the residents in the neighbourhood face financial as well as social constraints (such as language barriers, lack of Canadian work experience and credentials) which dictate the true access individuals have to the resources available within and beyond the boundaries of the neighbourhood. Warr et al. states that "the elderly, parents of young children, and household socioeconomic disadvantage are each associated with increased reliance on local services and amenities." Thus, in the SJT neighbourhood, as highlighted by the participants, there is a tremendous need for accessible, affordable and appropriate services that are equitably distributed in the vicinity to meet the needs of this very densely populated, low income area.

Housing has been found to be a very important factor in achieving and maintaining good health and wellbeing, in part because it encompasses the physical structure which shelters individuals from the elements but also because of the social meaning it has for individuals (CIHI, 2008). These two attributes have been found to be important in the literature for self rated and mental health. In the case of SJT, many of the apartments were perceived to be unhealthy and unsafe because of exposure to poorly maintained spaces as well as pests such as rats, cockroaches and bedbugs. Toronto Public Health ("Toronto Public Health Bed Bugs: <http://www.toronto.ca/health/bedbugs/index.htm>," 2008) states: "an infestation can cause anxiety



and a feeling of shame. They can also cause secondary infections, allergic reactions and financial hardship.” Exposure to cockroaches has been found to be an asthma trigger in inner-city neighbourhoods (Krieger & Higgins, 2002). These are just a few examples of the physical and emotional outcomes residents may face when exposed to pests. Epidemiological studies have also found that substandard housing has linkages to chronic illness as well as anxiety and depression (Krieger & Higgins, 2002). There were concerns in SJT over the lack of exhaust fans and general maintenance issues. Housing without proper ventilation may have higher levels of indoor humidity which, according to a number of reviews, can increase the risk of dust mites and mould (CIHI, 2008). Negative health outcomes such as asthma, headaches, nausea and chronic respiratory symptoms have been linked with these factors (CIHI, 2008; Krieger & Higgins, 2002).

A number of studies have found links between self rated and mental health and the level of satisfaction people felt with their homes as well as the control they felt over their home lives (CIHI, 2008; Krieger & Higgins, 2002). According to this research, people who owned their own homes were more likely to report being healthier than individuals who rented. St. James Town is one hundred percent rental accommodations. The participants in SJT noted a lack of control and the lack of satisfaction with the St. James Town apartment buildings. These feelings stemmed from the frustration residents felt over the lack of upkeep, safety concerns, as well as fear about the possible consequences of registering complaints with the property managers.

Access to safe, quality housing is a challenge for low income families. This may have other impacts on health, for example: the lack of affordable housing has been linked to inadequate nutrition, especially among children (Krieger & Higgins, 2002). Access to good quality and affordable food is important to achieving good health and wellbeing (CIHI, 2006). Low-income and rental households have a greater likelihood of experiencing food insecurity, defined “as not eating the desired quality or variety of foods; being concerned about not having enough to eat; and not having enough to eat, the latter being considered the most serious threat to health” (CIHI, 2006). The negative implications of food insecurity on health include inadequate nutrition as well as physical and mental health problems. The implications of financial constraints are especially true for new Canadians. According to a study conducted by the Ontario Association of Food Banks, “in 2001, 35.8 percent of new Canadians lived below the low income cut-off compared to the Canadian average 15.6 percent” (Laurie, 2008). In SJT, many households spend a high proportion of their income on shelter, leaving less money for food with an average household income that is less than half of that reported for Toronto (“N74-North St. Jamestown Profile: Socio-demographic,” 2005).

There is a growing body of research exploring the availability of healthy, affordable food in low income neighbourhoods which may influence health because of a lack of access to retailers offering fresh produce (Flowerdew et al., 2008). This deficiency has been coined a ‘food desert’ whereby there is a lack of healthy and affordable food choices, usually within poorer neighbourhoods. Individuals in these areas often have to choose between more expensive, healthier food and cheaper processed foods. The option of shopping elsewhere for groceries may be constrained by the cost of transportation as well as the additional time it would take to travel to another grocery store. SJT participants believed that good quality food was important to their physical and social health and wellbeing. Access to other services such as health care and transportation has also been shown to offer a health advantage (Flowerdew et al., 2008). These findings have been supported by a recent study conducted in Toronto whereby access to

community resources such as recreation centres, public transportation, grocery stores and schools were all important to the participants for good mental wellbeing (O'Campo, Salmon, & Burke, 2009). The amenities in SJT were noted for the positive role they play in participants' health and wellbeing.

The quality of the local physical environment has important implications for health and wellbeing. The effect that the local environment has on health can be explored through a multitude of pathways. It is not a simple linear relationship. This is supported by current qualitative research exploring the perceptions of health and the environment. In a study conducted in England, the outcomes demonstrated that green spaces can positively influence health and wellbeing but the importance of local knowledge in understanding the context, and how individuals conceptualized the relationship between health and the environment was prioritized (Pinder, Kessel, & Grundy, 2009). In SJT, many of the participants spoke about the importance of green space, how access to parks and beautiful settings within the neighbourhood was health promoting, allowing individuals to connect with others and provided an opportunity for recreation and an 'escape' from stress and close living quarters. Recent studies focusing on the possible physical and psychological health benefits of access to quality green spaces have highlighted the health promoting opportunities such as a reduction of emotional stress and fatigue, lower levels of obesity and higher self reported health (Korpela, Ylen, Tyrvaenen, & Silvennoinen, 2008; Pinder et al., 2009; Weden et al., 2008). It was also found that individuals living in inner city apartment buildings may benefit by having access to quality urban green spaces through stronger ties to neighbours as well as a greater sense of safety (Korpela et al., 2008). Even having aesthetically pleasing visible green space from apartment building windows was found to be emotionally restorative by reducing mental fatigue (Korpela et al., 2008).

Issues arise, however, when the green space is not well maintained, if there are undesirable activities taking place and when safety is compromised. These issues within the physical environment can have health damaging effects. In a recent study of residential areas in eight European cities, people residing in areas with high levels of graffiti and litter had higher odds of being overweight/obese and lower odds of being physically active than their counterparts living in residential areas with low levels of graffiti and litter (CIHI, 2006). In this study, high levels of greenery and walkability also had a positive effect on weight and levels of physical activity. A Canadian study conducted in Hamilton comparing residents who were satisfied with the physical environment of their neighbourhood with residents who were very unsatisfied found that those who were dissatisfied had increased odds of reporting one or more chronic conditions (Wilson, Eyles, Elliott, & Keller-Olaman, 2009). Recent research has also shown associations between poor physical and mental health outcomes such as increased stress, depression, feelings of powerlessness, anxiety and physiological responses and the negative perception of the physical environment and safety (Wilson et al. 2009; Warr et al., 2007). Feelings of lack of safety were compromised by "visible cues" such as vandalism, low lighting, as well as evident criminality (Warr et al. 2007). This is important in the SJT neighbourhood as many of the physical issues in the neighbourhood influence the perception of safety as well as the exposure to potential safety risks which may cause physical harm and or may trigger stress and inhibit an individual's ability to access resources such as green space (Israel et al., 2006).

The participants throughout this process noted both the physical attributes of the neighbourhood as well as the social characteristics. In a recent study conducted in the Vancouver census

metropolitan area, neighbourhood satisfaction was the strongest predictor of health status. Also important were variables such as feeling safe to walk alone at night, neighbourhood pride and perception of a close-knit neighbourhood (Collins, Hayes, & Oliver, 2009). These findings support the importance and the reinforcement of health through both physical and social neighbourhood factors. Strong relationships, networks and opportunities for participation in the community and the wider society were mentioned as assets of the neighbourhood as well as integral to the health and wellbeing of participants and the residents of SJT. Social capital and its relevance to health have been explored in a number of contexts. In a neighbourhood study of four contrasting residential areas in Glasgow, the perception of the social quality of neighbourhoods was found to influence self assessed and mental health after adjusting for individual characteristics such as age, sex and social class, (Ellaway et al., 2001). Residents who reported their health as 'fair' or 'poor' reported a significantly higher mean number of perceived local problems and neighbourhood cohesion. In this study, "there was a significant correlation between perceived neighbourhood problems and the measure of mental health and with total number of symptoms reported in the past month" (Ellaway et al., 2001). Similar results were also found in a study conducted in Lisbon, Portugal where living in a neighbourhood with weak social ties and low levels of social capital had a negative effect on self-rated health (Nogueira, 2009).

There is other evidence that the levels of social capital, community cohesion and trust in a neighbourhood may help promote health and offer protection against illness at the community level (CIHI, 2005). Two ways in which social capital may positively affect health have been proposed to be around the role of peer influences whereby individuals may be more likely to take part in health promoting behaviour if they see others participating. Social capital may also play a role in exerting some measure of social control, discouraging negative behaviours, usually in relation to individual's choices such as smoking but may also discourage activities such as littering (Nogueira, 2009). The second way social capital may positively influence health is around individual's self efficacy, or control over an individual's everyday life. When individuals feel supported and surrounded by people with similar goals and values, this may promote an individual's sense of identity which can help to mitigate stress (Nogueira, 2009). The SJT participants highlighted the importance of the social environment to their health and this has been supported by recent research. According to Nogueira (2009) "a sense of place, identity and belonging needs to be at the core of all healthy planning interventions."

The lives of St. James Town residents are influenced by their neighbourhood. The question of equity arises when looking at the risks individuals are being exposed to on a daily basis and the influence these factors have on their health (Israel et al., 2006). Warr et al. (2007) states that "households in poor neighbourhoods are also likely to experience increased exposure to potentially stressful local physical and social environments, and this intensifies the impact of adverse neighbourhood level influences." This is inequitable as individuals residing in low-income neighbourhoods such as St. James Town do not have access to the same personal and community resources which can "function to reduce health-damaging exposures and increase health protective resources at the individual and community levels (Ellaway et al. 2001). Throughout this process, participants identified that it was important to have access to quality resources that were safe, clean and affordable. The discrepancies between neighbourhoods because of socio-economic differences were unfair to residents. They believed that it was important for everyone to have the same rights and responsibilities, for there to be programs to support those who were most vulnerable. In a land of opportunity, success should not be for some,

optimal health should not be a privilege; it should be a right. In order to make that happen, participants believed there must be support from policy makers as well as the implementation and enforcement of services and resources that protect and promote the health and livelihoods of all residents in St. James Town and in the City of Toronto.

This report explores many of the physical and social factors at the neighbourhood level that impact the health and wellbeing of St. James Town residents. It is evident that there are complex interactions between these variables and health as well as the relationships between the physical and social environments. For example, the quality and accessibility of green space may influence the ways people interact in the neighbourhood and therefore reinforce specific uses of the spaces as well as overall perceptions of the neighbourhood. The many variables that participants captured through their photographs and stories show layers of meanings associated with the social determinants of health characterized by opportunities and deficiencies in the St. James Town neighbourhood. The multidimensional nature of neighbourhood characteristics and health were found in two other studies conducted in the city of Hamilton as well as another study in Toronto, Ontario (O'Campo et al., 2009; Wilson et al., 2009). Both of these studies found evidence to support that negative neighbourhood characteristics (such as physical and social disorder) detract more from the health of residents than positive neighbourhood characteristics contribute to health (O'Campo et al., 2009; Wilson et al., 2009). These significant conclusions point to the importance of prioritizing the focus of policies and programs to improve neighbourhood health on regenerative actions that will help to eliminate neighbourhood problems and inequality in resource distribution.

In order to improve, promote and protect the health and wellbeing of St. James Town residents, the participants called for a balanced approach of action and advocacy for changes to the neighbourhood. Participants highlighted the need for knowledge and awareness, from residents, community organizations as well as policy and decision makers. They also called for individuals and organizations to take more responsibility, to demonstrate support and if needed, provide enforcement. Residents saw potential for action and for positive change that even small steps could accomplish but there had to be a commitment to recognizing the needs of the people living in the neighbourhood. The participants in this study also highlighted the need for individuals to have pride in their neighbourhood and that the perception of St. James Town needs to change. Healthy communities have been defined as ones that “protect and improve the quality of life of their citizens, promote healthy behaviours and minimize hazards for their residents, and preserve the natural environment” (Dannenberg, Jackson, Frumpkin, Schieber, Pratt, Kochitzky et al., 2003). This is the kind of community SJT residents are striving for and hopefully with the support of residents, community organizations and policy makers, the neighbourhood, in time will become a healthier community.

## **6. Conclusion**

The results indicate that SJT residents are experiencing a range of physical, social, economic and cultural factors in their neighbourhood that are affecting their physical, mental and emotional health and wellbeing. Negative issues that came up repeatedly in the photo stories were economic difficulties associated with being a newcomer to Canada, garbage around SJT, the lack of green space and the poor quality of park facilities in the neighbourhood. There were also social variables such as fear associated with walking outside during the night, feelings of powerlessness

to incite change due to communication difficulties and feelings that residents are not heard by authorities. There were also concerns about the lack of feelings of ownership residents had for their community, and the poor maintenance of high-rise apartment buildings. The positive factors discussed in many of the photo stories included the presence of the waterfall located on Wellesley Street, social support networks, the new Wellesley Community Centre, and the location of SJT within the greater context of the city of Toronto. All of these factors are perceived to affect the health and wellbeing of newcomer residents of SJT.

It is important to understand that the majority of the issues and assets highlighted in the St. James Town neighbourhood by participants would not be considered to be directly within the realm of the health sector. However these issues influence the behaviours, attitudes and exposure to risks and resources experienced by St. James Town residents and therefore play an important role in their health and wellbeing. These findings are in agreement with the World Health Organization's remark in their 2008 annual report: "insufficient recognition of the human dimension in health and the need to tailor the health service's response to the specificity of each community and individual situation represent major shortcomings in contemporary health care, resulting not only in inequity and poor social outcomes, but also diminishing the health outcome returns on the investment in health services" (WHO, 2008). In view of these findings, it may be concluded that good health is achievable only when concerted efforts are made to address the social, economic, environmental and biological factors simultaneously. It is also apparent that where you live matters and good health and wellbeing can be supported by reducing negative neighbourhood characteristics and supporting the creation of positive amenities as well as programming and services.

## **7. Recommendations**

Based on participants' observations and suggestions, several actions are recommended. These are organized under two overarching categories according to the levels of intervention necessary; neighbourhood level and local, provincial and federal government level.

**"Neighbourhood Level"** recommendations address issues defined as constraints that one could reasonably expect to be addressed at the neighbourhood level by providing tailored resources and additional support to the community to meet specific needs. These activities may include for example, health education and public awareness programs.

**"Local, Provincial and Federal Government Level"** recommendations address issues that require action at a level upstream from the community. These concerns may require intersectoral and cross-government actions because many of them are related to social and economic inequities that affect individuals as well as the neighbourhood as a whole. The roots of these issues lie deeper than the SJT neighbourhood and affect the opportunities individuals have inside as well as outside the community. Issues such as economic difficulties associated with being a newcomer, language barriers, the affordability of healthy fresh foods, the stigmatization of the neighbourhood and the lack of pride and ownership in the community and safety issues are all issues that require actions and changes through policy reform and the increased provision of resources. Other issues include poorly maintained green spaces and playgrounds, closed or poorly maintained recreation facilities, as well as the beautification of common spaces through built

infrastructure. These issues have to be addressed through the property owners as well as through the support and enforcement of standards by the City of Toronto.

### **7.1 Neighbourhood Level**

There are many concerns which may be addressed within the community, though they may require support and resources from outside the neighbourhood, for example, from governmental and non-governmental sources. The main concerns that can be either fully or partially addressed at the level of the community are lack of knowledge and awareness about neighbourhood issues, garbage, the pigeon overpopulation, and increasing social networks and supports. Lack of pride and ownership can also be partially addressed at the neighbourhood level by increasing the cleanliness and maintaining the amenities and resources in the community.

Over half of all SJT residents are newcomers and many of them are not aware of their rights and responsibilities in this country. To help them understand their rights, responsibilities and expectations, we recommend the recruitment and training of available health and social health workers from within the neighbourhood to:

1. Organize and provide language specific sessions on human rights issues and their responsibilities in this new society
2. Organize language specific community education sessions about proper waste disposal and the hazards posed by litter in the environment
3. Organize language specific community education sessions about the health consequences of feeding and sustaining the large pigeon population
4. Organize language specific community education sessions on health and hygiene
5. Start community gardens in common spaces to get community members involved in planting and to grow fresh vegetables in the community
6. Organize community days to clean up litter and improve green spaces through planting
7. Start balcony gardening of fresh vegetables and flowers

### **7.2 Local, Provincial and Federal Government Level**

There are several concerns that will require change that comes primarily from outside the community. Community members can organize and advocate for change, but the changes themselves will need to be initiated by the municipal, provincial or federal governments or by the private sector. Concerns that fit into this category are poverty, under/ unemployment, lack of recognition of foreign credentials and experience, lack of affordable housing, insufficient recreational facilities and green spaces, increasing social services accessible in the community, increasing patrolling for security, inadequate waste management both in buildings and public spaces, and lack of enforcement of rental code standards.

St. James Town is generally considered to be a well served neighbourhood and is therefore excluded from many investment projects. We recommend the need for concerned authorities to evaluate the available services based on the size of SJT population. In calculating services per capita, it is important to note that the population size is almost double of that reported by Census 2006. To address these issues we recommend the following:

1. Evaluate current social services available in SJT to determine if levels of service per capita are comparable to the rest of the city
  - Increase services if levels per capita are below city average
2. Evaluate whether the availability of recreational facilities and park space per capita in SJT is comparable to its adjacent neighbourhoods
  - If it is less, increase recreational facilities in the community
3. Make a plan for enforcement of rental codes with building managers
  - Send inspectors to document resident concerns and hold managers accountable
  - Advocate to building managers regarding needed improvements to buildings – child safety locks, kitchen ventilation fans, elevator repairs, improved waste storage and recycling collection facilities, allocation of secure bike storage areas
4. Enforce policies that require recycling collection in apartment buildings and public spaces
  - Increase the number of garbage bins in public spaces
  - Provide recycling bins in the apartment buildings and in public spaces
5. Promote social integration of newcomers by providing public spaces for socialization
  - Maintain community pools and provide more community beautification projects like the waterfall near Food Basics
  - Increase the number of benches in public spaces for people to come and sit with their children and socialize with fellow residents
6. Improve external reputation and safety of the neighbourhood
  - Increase presence of Toronto Police in the community to reduce crime and fear in residents
  - Increase lighting in all public spaces including public spaces within the buildings
  - Work with media to give equal representation to both the positive as well as the negative events occurring in the neighbourhood
7. Promote ownership in the neighbourhood
  - Consider inclusionary zoning in any new condominium projects in the area
8. Initiate relevant programs to help newcomers gain Canadian work experience, language training, and match newcomers to employment opportunities that match their skills and training
  - Work with the schools, community and social service organizations in SJT to ensure that newcomers are aware of and take advantage of these opportunities
  - Initiate flexible schedules for these opportunities with appropriate services such as child care so that it is easy for people to access these programs



- Widely publicize these services in multiple languages

## **8. Sharing of Information**

Community based research requires relevant feedback mechanisms to allow the sharing of information with residents, community partners, participants and policy makers. A comprehensive knowledge exchange strategy was developed for the dissemination of information and to highlight the activities of the *Initiative*; differentiated by audiences and purposes. A website was also created exclusively for the *SJT Initiative* ([www.sjtinitiative.com](http://www.sjtinitiative.com)).

### **8.1 Community and Local Stakeholders**

To keep residents, grassroots organizations, and other stakeholders aware and involved in the project, the photos and stories collected through the Photo Voice project were shared with the community and others at a Community Forum & Expo held at Rose Avenue Public School in SJT on Thursday, March 20<sup>th</sup>, 2008. The Photo Voice project and the Community Mapping project were displayed together. Fifty Four of the seventy seven photos with stories were enlarged and displayed with captions based on the full stories. All seventy seven stories and photos could be viewed in binders accompanying the enlarged photos. Most photographers were available to talk about their photos and maps and to answer questions from the audience.

#### **8.1.1 Community Forum and Expo**

The Community Forum & Expo also served as the venue to launch the new *St. James Town Initiative* website ([www.sjtinitiative.com](http://www.sjtinitiative.com)). This site has information about all of the *St. James Town Initiative*'s activities and provides a variety of resources to the community, including links to relevant health research and community organizations. The site is also being used to profile community members working in St. James Town, and efforts are made to encourage community members to post comments, advertise events as well as volunteer and work opportunities.

The audience at the Community Forum and Expo were encouraged to provide their comments to the *Community Voices* project. They could type their comment on the available computer and have it projected on the screen immediately to share with the audience, and/or write a comment in a language of their choice and drop it in the box "add your voice". In total, over three hundred people from the community, the government, universities and various organizations attended the Community Forum & Expo. The general response from community members was that the photos and captions were accurately portraying the views of SJT residents. In the words of one resident, this is indeed "a job well started," and everyone involved in bringing *Community Voices* to life should be commended for this achievement. But, this is only the beginning. The momentum, energy, trust, and flow of ideas that the initial projects and the *Community Voices* Forum & Expo have generated can carry the *St. James Town Initiative* into its next phase.

### **8.2 Government and Other Public Stakeholders**

To enhance dissemination of the research results, and to gain the interest and involvement of public policy-makers in the project it was decided by the *SJT Initiative* Steering Group to follow up the community event with a photo display in the Toronto City Hall Rotunda. This event took

place September 23- 26, 2008. On the last day of the exhibit the Steering Group invited their fellow residents to see the display. Following this event, arrangements were made for the Steering Group to present the salient findings from the Photo Voice research to program managers, planners and policy makers at the City Hall on November 13<sup>th</sup>. This event was very successful with sixteen people from various departments of the City including the City Councillor for the St. James Town neighbourhood and surrounding area attending this meeting. The Steering Group made specific recommendations to improve their neighbourhood and make it a healthier and a safer place to live. The presentation is available on the project website.

The Steering Group and project staff also had an informal meeting with the Board Chair of Toronto Central LHIN, the newly developed system of Ontario regional health authorities called Local Health Integration Networks, and briefed him about the *Initiative* and its activities.

This is one of the many ways the action component of the *Initiative* has succeeded in transferring knowledge and building the skills of community members with the ultimate goal of empowering the community. This is also an example of how participatory research methodologies may be used for promoting newcomer residents participation in informing and influencing local policies.

### **8.3 General Public**

An important communications objective of the *SJT Initiative* is to raise public awareness of the important influences of neighbourhood and social determinants of health on newcomers' health. To this end the SJT website ([sjtinitiative.com](http://sjtinitiative.com)) which is a dedicated project page on the WI website includes: regular updates; innovative community-based research results and provides other opportunities for people to get involved with the project. The Wellesley Institute's quarterly newsletter also includes a section with updates on the *SJT Initiative*. This report will be made available on the website and is expected to be of interest to the general public, academics and other researchers working in this area.

#### **8.3.1 SJT Initiative Website**

The *SJT Initiative* website has been a big success. The number of users has been consistently high since the site launch in March 2008. The current statistics indicate that in the last seven months the average number of hits on the website has been 23,791 hits/month (as of October 30, 2008). The community friendly website employs new social media technologies such as video, interactive service maps, photo galleries, and blogging capabilities to highlight neighbourhood characteristics and their effect on health as perceived by new immigrants who live in this high density, inner-city neighbourhood. The blog helps to create wider awareness of the neighbourhood issues and focus public attention on the many of the social determinants of health that are impacting the St. James Town neighbourhood residents.

## **9. Moving Forward**

### **9.1 Developing an Interactive Google Map: A New CBR Tool**

This summer the *Initiative* engaged SJT students to develop a comprehensive resource and service directory for the project area; and to develop an interactive web-product using Google

map that would allow users to identify and locate the available resources and services available in North St. James Town. Both of these products are now available on the *SJT Initiative* website.

The youth were employed to do an environmental scan of existing social resources, services, and organizations in SJT. They were involved in planning, designing the data collection tool, entering the data on a spreadsheet, and designing the directory. In addition to collecting information, they also took pictures of the signboards of the available service resources. To make this directory interactive, a newcomer computer programmer from the neighbourhood was hired to develop an interactive web-product using Google map that would allow users to identify and locate the various resources and services available in North St. James Town.

This innovative project provides a unique, previously unavailable tool that focuses on the service resources of North St. James Town, a neighbourhood where 65% of the population are newcomers. This community-based project is one of the first of its kind in Toronto to provide both an online identity for a community and an interactive web service to help its many newcomers. We believe that the *St James Town Initiative* site and its new products can also act as a prototype and template for other local communities to follow.

## **9.2 Extending Photo Voice to a New Level:**

### **Integration of Photo Voice and Concept Mapping**

The Concept Mapping Project began in July, 2008 and builds on the work of the Photo Voice Project. Concept Mapping is a mixed methods approach that integrates qualitative group processes with multivariate statistical analyses to help articulate and delineate concepts and their interrelationships.

Concept mapping was used as a mechanism to extend the Photo Voice work of the SJT residents. This mechanism provided the opportunity to further conceptualize and organize factors, as represented by photographic images, related to neighbourhood and health. Additionally, the process enabled neighbourhood residents to engage in further discussion about the perceived importance of those factors and the potential for action to be taken to support or address the factors.

The data collection process for this project is new and innovative and different than the traditional approach to Concept Mapping. Typically, written statements are inputted for sorting and rating activities, but for the first time, visual stimulus was used. The photographs taken by residents served as the foundation for the sorting and rating procedures.

## **9.3 Establishing Community Advocacy and Action Group: Residents Involvement in Policy Recommendations and Direction**

The *SJT Initiative* adopted ways to put power into the hands of residents and thereby succeeded in transferring the ownership of its participatory research to SJT residents. This process generated genuine interest among research participants and others who were exposed to the *SJT Initiative's* research to motivate them to continue their affiliation with the *Initiative*. Individuals who were

interested were able to get further involved through volunteering with the Steering Group. The first Steering Group was created through a nomination process by including participants from the Photo Voice and the Community Mapping projects. The second Steering Group came together through a nomination process which included the Concept Mapping project as well (Annex IV). The present operating Steering Group consists of members who got involved with the *Initiative* at different points in time within the past two years. Some of the members are original photographers and have been affiliated with the *Initiative* from the very start whereas some are relatively new who joined the group earlier this year through the Concept Mapping project. This combination of new and previous community members enriched the group and helped to distribute the work burden among a larger group of community members.

The Steering Group has received training from the SJT staff on presentation and communication skills to help them effectively present the Photo Voice results and recommendations during their meeting with City of Toronto officials on November 13, 2008. A Community Engagement specialist with the Wellesley Institute is now working with this Steering Group towards actualizing the recommendations discussed with the City of Toronto officials. It is expected that over time, with increased capacity and skill building, this group will be developed into an independent community advocacy group that can continue to work towards bringing positive social changes in the neighbourhood.

#### **9.4 Using Results to Inform Upcoming Structured Qualitative and Quantitative Research**

The findings from the Photo Voice and the Community Mapping projects are being used to inform further qualitative as well as quantitative research. The *Initiative* is in the process of developing proposals which are planned for the second phase of research. The upcoming qualitative research project is exploratory in nature and will explore the perceptions of people's mental health and wellbeing, examining the differentials within and among four ethno-racial groups in SJT. The projects in development will engage community workers and interpreters to maintain the participatory process of the *Initiative*.

### **10. Lessons Learned**

*Community development is not only learning skills but also to transfer learned skills to other members. The Wellesley Institute has been doing this job which will ultimately empower local people. These are all strengths of this neighbourhood.*

This quote highlights one participant's positive perception of the process, demonstrating the empowering and capacity building potential this approach to research can have.

- Conducting community based research has its challenges but if careful attention is given to the process of engagement and building the capacity of the participants, it can produce meaningful research as well as action. In order to do this, the interests and goals of the community partners and participants must drive the process. From the onset of this project, the decisions and directions were community based; ensuring that participants were given the opportunity to learn, share and build their own capacity to advocate for positive social

changes. To accommodate and encourage this, the *SJT Initiative* project staff played a mentorship and facilitation role, providing multiple opportunities for networking, sharing and consensus building. The project aimed to be flexible and accessible to all participants, taking into account their time and effort by holding the meetings in locations that were easy to get to and at times when people were available as well as providing food and financial compensation. The participants as a group were able to decide how the project would disseminate the findings and the actions that would be taken once the Photo Voice project was completed. The members of the Steering Group were nominated members of the researchers of the Photo Voice project. Many of the participants from the research team still continue to be involved with the *Initiative*.

- It is a continuous challenge to recruit and engage participants because of a resistance to and a lack of trust towards formal research in the neighbourhood. This is a formidable challenge that many researchers face, often because of the community feeling like a ‘guinea pig’ having been the subject of past research and seeing no benefit once the research is done (Israel et al., 1998). The *Initiative* adopted the following measures to address these constraints:
  - By choosing a methodological approach to neighbourhood level research that was engaging and had meaningful outcomes for participants, planners, as well as the *SJT Initiative*. Careful attention to CBR principles, capacity building and community engagement processes helped to create a meaningful, accessible and positive experience for participants. This in turn has encouraged ongoing involvement of participants.
  - To aid the recruitment and ensure good representation from various ethno-racial groups in the project, the *Initiative* partnered with an already established grassroots organization that is well respected and provides services to different ethno racial groups in SJT.
  - The time commitment required from participants was a limitation for many of the individuals because many of them are underemployed and have to take on more than one job to support their families. The *Initiative* accommodated participant’s time constraints by providing maximum time flexibility. Almost all community meetings and workshops were conducted in the evening or on Saturdays.
- In a complex community like SJT where there are many gatekeepers to the community, relationship building and entry into the community can be very challenging. Some of the strategies used by the *Initiative* to establish itself in the community were:
  - It is important to build trust and relationships through representation and engagement in the community. This included attending community meetings and showing support in formal and informal events in the neighbourhood, and creating opportunities to share in community life for example: providing continued financial support and supporting community events such as the annual SJT Summer Festival. These actions are about giving back to the community outside of research objectives.

- A willingness to collaborate with other organizations when SJT residents approached the *Initiative* to help them develop their skills was an important way to engage the neighbourhood. For example earlier this year the project organized customized workshops to help residents of a steering committee to develop their basic management skills and leadership qualities to help them work more effectively.
- In a neighbourhood where the majority of the population are immigrants and linguistically segregated, it can be difficult to find a grassroots organization that is utilized by all ethno-racial groups. Almost all of the SJT grassroots organizations are involved in service delivery and it was very challenging to find an organization who was interested in developing a long term partnership with the research project. In SJT, it was also difficult because the community was very resistant to a new research project without having a major action component in the project. The *Initiative* used several strategies to overcome these challenges:
  - The *Initiative* decided from the very beginning to work with multiple partners in the community including working directly with residents. This helped the project to continue to work at the same pace when after six months one of the formal partner organizations decided not to continue to work on research with the *Initiative* because of changing priorities.
  - To engage newcomer residents and develop interest in the project the *Initiative* adopted non-traditional methods of research e.g. arts-based methods that place power in the hands of the participants. One of the advantages of using these methodologies was that the participants did not perceive their work to be research and data collection, rather they were engaged in sharing their voices to advocate for changes.
  - The *Initiative* uses various means to engage residents. Every year, summer internships are provided on a merit basis to SJT students. These students are engaged to do small community projects. For example, this summer the students worked on the SJT resource directory which is now available on our website. These projects help to create awareness in the community, engage young people and offer them valuable work experience. One of the summer students joined the SJT Steering Group and has continued his involvement. Such activities also help the *Initiative* to gain community trust and respect by showing continued commitment to the community.
  - The *Initiative* from time to time depending on resource availability provides employment opportunities for community members. Such activities particularly help newcomer residents to gain needed Canadian work experience to help them enter the formal labour market. One recent example is the hiring of a foreign trained computer programmer to design the interactive SJT Google map. This computer programmer has been in Canada for over two years and has not been able to find a job in his field.



- In diverse, newcomer dominant communities, it is important to find community animators who are in different life stages and who represent and are well connected with different ethno-racial groups in the neighbourhood. This is important in gaining in-depth and representative research but it is also important because the social networks these individuals have built are an important resource for gaining access to different populations. Building new relationship is very important in newcomer dominant communities as residents tend to be highly mobile. The turnover of residents in SJT is very high. Residents predict that many newcomers stay in the neighbourhood for about five years. This is challenging for developing and maintaining momentum in a long term research project but if individuals from many different backgrounds and life stages are engaged, it is possible to build sustainability by recruiting individuals at many stages in the project.
- To be successful with CBR projects, money and preferably some service delivery components need to be developed while planning the project. Sufficient time and resources should be allocated for developing and maintaining partnerships in the community. Residents and organizations must see the clear and upfront benefits (short and long term) of participating in research projects.
- To work with a complex and research resistant community is very challenging and time intensive. CBR projects must build in additional time and program flexibility in order to overcome these constraints.
- One of the key strengths of the *Initiative* has been the continued recruitment, relationship building and the maintenance of participation. It is important that the community is reached on an ongoing basis through different means: traditional (signing up people face to face and speaking to them about the project, reaching others through the word of mouth of other participants) and modern communication technologies (email, newsletters, flyers in different languages, website blogs, interactive website etc). It is essential to mobilize the community and help it to develop advocacy potential for creating positive social changes in the community. This process also helps the community mobilize by developing links with government and other agencies and gaining access to various resources.

## **11. Innovative Work of the SJT Initiative: Moving CBR to a New Level**

1. Photo Voice is not only a powerful method for engaging research resistant and vulnerable communities; it is also a powerful tool for mobilizing newcomer residents. Using this methodology the *Initiative* was able to establish a Steering Group who could voice the concerns of newcomer residents to program managers and planners at City Hall. This project was able to demonstrate the power of CBR and how this work can move forward from evidence gathering to advocacy and action. Another important outcome achieved from this process was to foster residents' participation in informing and influencing local level policies. The City Hall presentation and the list of people who attended the meeting are available on the website.
2. The *SJT Initiative* is one of the few CBR projects that engaged community residents in the process of developing a comprehensive resource and service directory for the project

area; and to develop an interactive web-product using Google map that would allow users to identify and locate the available resources and services available in North St. James Town. Both of these products are now available on the *SJT Initiative* website [www.sjtinitiative.com](http://www.sjtinitiative.com).

3. *The Initiative* is pioneering the work of integrating the Photo Voice project with Concept Mapping. This is the first time that Concept Mapping is being used to generate ideas with visual stimuli. The integration of these two participatory, qualitative and semi-quantitative methodologies will help the project to meaningfully summarize the findings for planning purposes.

## References

- Baker, T. A., & Wang, C. C. (2006). Photovoice: Use of a Participatory Action Research Method to Explore the Chronic Pain Experience in Older Adults. *Qual Health Res*, 16(10), 1405-1413.
- Bowling, A., Barber, J., Morris, R., & Ebrahim, S. (2006). Do perceptions of neighbourhood environment influence health? Baseline findings from a British survey of aging. *Journal of Epidemiology & Community Health*, 60(6), 476-483.
- Bryant, T., Raphael, D., & Travers, R. (2007). Identifying and strengthening the structural roots of urban health in Canada: participatory policy research and the urban health agenda. *Promot Educ*, 14(1), 6-11.
- Canadian Institute for Health, I. (2006). Improving the Health of Canadians: An Introduction to Health in Urban Places. Ottawa: CIHI. Available on line at: [www.cihi.ca/cphi](http://www.cihi.ca/cphi).
- Castleden, H., Garvin, T., & Nation, H.-a.-a. F. (2008). Modifying Photovoice for community-based participatory Indigenous research. *Social Science & Medicine*, 66(6), 1393-1405.
- Caughy, M. O., O'Campo, P. J., & Muntaner, C. (2003). When being alone might be better: neighborhood poverty, social capital, and child mental health. *Soc Sci Med*, 57(2), 227-237.
- Chaskin, R. (2001). Defining Community Capacity: A Definitional Framework and Case Studies From a Comprehensive Community Initiative. *Urban Affairs Review*, 36(3), 291-323.
- Chen, J., Ng, E., & Wilkins, R. (1996). The health of Canada's immigrants in 1994-95. *Health Rep*, 7(4), 33-45, 37-50.
- Chen, J., Wilkins, R., & Ng, E. (1996). Health expectancy by immigrant status, 1986 and 1991. *Health Rep*, 8(3), 29-38(Eng); 31-41(Fre).
- CIHI. (2005). Developing a healthy communities index. pp. 1-67): Canadian Institute for Health Information.
- CIHI. (2006). Improving the Health of Canadians: Promoting Healthy Weights. Summary Report. . Canadian Institute for Health Information (CIHI). Available at: [www.cihi.ca/cphi](http://www.cihi.ca/cphi)
- CIHI. (2008). Mentally Healthy Communities: A Collection of Papers. Ottawa: Canadian Institute for Health Information,.
- Collins, P., C., Hayes, M., V., & Oliver, L., N. (2009). Neighbourhood quality and self-rated health: A survey of eight suburban neighbourhoods in the Vancouver Census Metropolitan Area. *Health Place*, 15(1), 156- 164.
- CSDH. (2007). Achieving Health Equity: From root causes to fair outcomes (p. 78): Commission on Social Determinants of Health, World Health Organization.
- Cummins, S. (2007). Commentary: investigating neighbourhood effects on health--avoiding the 'local trap'. *Int J Epidemiol*, 36(2), 355-357.
- Cummins, S., Curtis, S., Diez-Roux, A. V., & Macintyre, S. (2007). Understanding and representing 'place' in health research: a relational approach. *Soc Sci Med*, 65(9), 1825-1838.
- Cuthill, M. (2003 ). The Contribution of Human and Social Capital to Building Community Well-Being: A Research Agenda Relating to Citizen Participation in Local Governance in Australia. *Urban Policy Research*, 21(4), 373-391.

- Dannenberg, A., Jackson, R., Frumpkin, H., Schieber, R., Pratt, M., Kochitzky, C., et al. (2003). The Impact of Community Design and Land-Use Choices on Public Health: A Scientific Research Agenda. *Am J Public Health*, 93(9), 1500-1508.
- Dunn, J. R., & Dyck, I. (2000). Social determinants of health in Canada's immigrant population: results from the National Population Health Survey. *Soc Sci Med*, 51(11), 1573-1593.
- Dunn, J. R., Veenstra, G., & Ross, N. (2006). Psychosocial and neo-material dimensions of SES and health revisited: predictors of self-rated health in a Canadian national survey. *Soc Sci Med*, 62(6), 1465-1473.
- Ellaway, A., Macintyre, S., & Kearns, A. (2001). Urban Studies; Perceptions of Place and Health in Socially Contrasting Neighbourhoods.(Statistical Data Included). (Statistical Data Included) (p. 2299(2218)): Carfax Publishing Co.
- Evans, R., Barer, M. L., & Marmor, T. (1994). Why are some people healthy and others not? : the determinants of health of populations: New York.
- Flowerdew, R., Manley, D., J., & Sabel, C., E. (2008). Neighbourhood effects on health: does it matter where you draw the boundaries. *Soc Sci Med*, 66(6), 1241-1255.
- Hallsmith, G. (2003). The Key To Sustainable Cities: Meeting Human Needs, Transforming Community Systems. Canada: New Society Publishers.
- Hyman, I. (2006). Determinants of Immigrant Health: A literature review. Report to Public Health Agency of Canada, Ottawa (unpublished working paper). Toronto: Independent Consultant.
- Israel, B. A., Schulz, A. J., Estrada-Martinez, L., Zenk, S. N., Viruell-Fuentes, E., Villarruel, A. M., et al. (2006). Engaging urban residents in assessing neighborhood environments and their implications for health. *J Urban Health*, 83(3), 523-539.
- Israel, B. A., Schulz, A. J., Parker, E. A., & Becker, A. B. (1998). Review of community-based research: assessing partnership approaches to improve public health. *Annu Rev Public Health*, 19, 173-202.
- Kearns, A. S. C., Regeneration and Urban Policy. . (2004). Social Capital, Regeneration and Urban Policy.: The ESRC Centre for Neighbourhood Research.
- Korpela, K. M., Ylen, M., Tyrvaenen, L., & Silvennoinen, H. (2008). Determinants of restorative experiences in everyday favorite places. *Health and Place*, 14(1), 636-652.
- Krieger, J., & Higgins, D. (2002). Housing and Health: Time Again for Public Health Action. *Am J Public Health*, 92(5), 758-768.
- Laurie, N. (2008). The Cost of Poverty: An Analysis of the Economic Cost of Poverty in Ontario. Toronto, ON: Ontario Association of Food Banks.
- Laverack, G. (2005). Evaluating Community Capacity: Visual Representation and Interpretation. *Community and Development Journal*, 41(3), 266-276.
- Lopez, E., Eng, E., Robinson, C. O., & Wang, C. (2005). Photovoice as a Community-Based Participatory Research Process. In B. A. Israel, E. Eng, A. Schultz & E. A. Parker (Eds.), *Methods in Community-based Participatory Research for Health* pp. 326-348). San Francisco, California: Jossey Base.
- Minkler, M., & Wallerstein, N. E. (2003). *Community Based Participatory Research for Health*. San Francisco, CA.
- N74-North St. Jamestown Profile: Socio-demographic. (2005). Toronto Community Health Profiles Partnership.
- Ng, E., Wilkins, R., Gendron, F., & Berthelot, J. M. (2005). The Changing Health of Immigrants. *Canadian Social Trends.*, 78, 15-19.

- Nogueira, H. (2009). Healthy communities: The challenge of social capital in the Lisbon Metropolitan Area *Health &Place*, 15(1), 133– 139.
- Nowell, B. L., Berkowitz, S. L., Deacon, Z., & Foster-Fishman, P. (2006). Revealing the Cues Within Community Places: Stories of Identity, History, and Possibility. *Am J Community Psychol*, 37(1), 29-46.
- O'Campo, P., Salmon, C., & Burke, J. (2009). Neighbourhoods and mental well-being: What are the pathways? . *Health &Place*, 15(1), 56–68
- Phillimore, P. (1993). How do places shape health? Rethinking locality and lifestyle in North-East England  
In P. e. al. (Ed.), *Locating Health: Sociological Spectrum* pp. 411-431). England.
- Pinder, R., Kessel, A., & Grundy, C. (2009). Exploring perceptions of health and the environment: A qualitative study of Thames Chase Community Forest *Health and Place*, 15(1), 349–356.
- Putnam, R. (2000). *Bowling Alone: The Collapse and Revival of American Community*. New York: Simon and Schuster.
- Ramirez, L. B., Baker, E., & Metzler, M. (2008). *Promoting Health Equity: A Resource to Help Communities Address Social Determinants of Health*. Atlanta, USA: Department of Health and Human Services, Centers for Disease Control and Prevention.
- Raphael, D., Bryant, T., & Curry-Stevens, A. (2004). Toronto charter outlines future health policy directions for Canada and elsewhere. *Health Promot Int*, 19(2), 269-273.
- Sooman, A., & Macintyre, S. (1995). Health and perceptions of the local environment in socially contrasting neighborhoods in Glasgow. *Health and Place*, 1(1), 15-26.
- Statistics Canada. (2001). 2001 Census. . Statistics Canada.
- Statistics Canada. (2003). *Longitudinal Survey of Immigrants to Canada: Process, progress and prospects*.
- Statistics Canada. (2006). *Census tract profile for 0065.00, Toronto and Ontario*. Statistics Canada.
- Stevens, C. A. (2006). Being Healthy: Voices of Adolescent Women Who Are Parenting. *Journal for Specialists in Pediatric Nursing*, 11(1), 28-40.
- Taylor, M. (2000). Communities in the Lead, Organizational Capacity and Social Capital. *Urban Studies*, 37(5-6), 1019-1035.
- Toronto Public Health Bed Bugs: <http://www.toronto.ca/health/bedbugs/index.htm>. (2008). Toronto.
- United Nations General Assembly (1952). *The social, physical, and environmental conditions in which people live and work can have powerful influence on their health and wellbeing* [New York]: United Nations.
- Wang, C., Burris, M. A., & Ping, X. Y. (1996). Chinese Village Women as Visual Anthropologists: A Participatory Approach to Reaching Policymakers. *Social Science & Medicine*, 42(10), 1391-1400.
- Wang, C. C. (1999). Photovoice: A Participatory Action Research Strategy Applied to Women's Health. *Journal of Women's Health*, 8(2), 185-192.
- Wang, C. C., Anderson, R. M., & Stern, D. T. (2004). Exploring professional values and health policy through Photovoice. *Med Educ*, 38(11), 1190-1191.
- Wang, C. C., Cash, J. L., & Powers, L. S. (2000). Who Knows the Streets as Well as the Homeless? Promoting Personal and Community Action Through Photovoice. *Health Promot Pract*, 1(1), 81-89.

- Wang, C. C., Morrel-Samuels, S., Hutchison, P. M., Bell, L., & Pestronk, R. M. (2004). Flint Photovoice: Community Building Among Youths, Adults, and Policymakers. *Am J Public Health*, 94(6), 911-913.
- Wang, C. C., & Redwood-Jones, Y. A. (2001). Photovoice Ethics: Perspectives From Flint Photovoice. *Health Education & Behavior*, 28(5), 560-572.
- Warr, D. J., Tacticos, T., Kelaher, M., & Klein, H. (2007). 'Money, stress, jobs': residents' perceptions of health-impairing factors in 'poor' neighbourhoods. *Health Place*, 13(3), 743-756.
- Weden, M., Carpiano, R. M., & Robert, S. (2008). Subjective and objective neighbourhood characteristics and adult health. *Soc Sci Med*, 66(6), 1256-1270.
- WHO. Preamble to the Constitution of the World Health Organization as adopted by the International Health Conference, New York, 19-22 June, 1946; signed on 22 July 1946 by the representatives of 61 States (Official Records of the World Health Organization, no. 2, p. 100) and entered into force on 7 April 1948.
- WHO. WHO Preamble to the Constitution of the World Health Organization as adopted by the International Health Conference, New York, 19-22 June, 1946; signed on 22 July 1946 by the representatives of 61 States (Official Records of the World Health Organization, no. 2, p. 100) and entered into force on 7 April 1948.
- WHO. (1985). Health Impact Assessment : Glossary of Terms: <http://www.who.int/hia/about/glos/en/index.html> World Health Organization Europe.
- WHO. (2008). The World Health Report 2008 Primary Health Care – Now More Than Ever. World Health Organization.
- Wilkinson, R. (1996). *Unhealthy Societies: The Afflictions of Inequality*. U.K: Routledge
- Wilkinson, R., & Marmot, M. (2006). *Social Determinants of Health* U.K: Oxford University Press.
- Wilson, K., Eyles, J., Elliott, S., & Keller-Olaman, S. (2009). Health in Hamilton neighbourhoods: Exploring the determinants of health at the local level *Health & Place*, 2009(1), 374-382.
- Wolfson, M., Kaplan, G., Lynch, J., Ross, N., & Backlund, E. (1999). Relation between income inequality and mortality: empirical demonstration. *Bmj*, 319(7215), 953-955.