

Lessons Learned From Engaging with Members of the Black Community in Sudbury & Districts

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Executive Summary

According to the 2021 census, the Black population is the largest visible minority in Greater Sudbury. It is well documented that this group is a very diverse population and community members face health inequities disproportionate to non racialized individuals.

In accordance with the *Racial Equity Action Framework*, Public Health Sudbury & Districts (Public Health) conducted several informal meetings in 2021 with Black influential leaders and community members to identify potential barriers to COVID-19 vaccine uptake among priority communities. In 2022, Public Health met with members of this group once again to better understand their primary activities and roles and to ascertain concerns they may have had in navigating services. Ultimately, Public Health is invested in trying to determine ways in which this priority population can be best supported.

The community consultations conducted in 2022 involved reaching out to twelve Black influential leaders and community members, five Black-owned organizations and businesses, and four community service providers that work closely with Black communities. In addition, an internal brainstorming session with staff was held. During the community consultations, we learned the community organizations that gather most Black people in Sudbury can be classified into four broad typologies: associations from one nationality, associations from several nationalities, Black-owned businesses, and community services that work for or collaborate with Black communities. The primary activities of each organization fall under five themes or categories: social support, resettlement support, cultural activities and leisure, social networking, and enterprise development.

The key themes of what we heard included health / community resources (information concerns, few physical activity / leisure opportunities), access (financial resources, family physicians, transportation, employment, housing), support (limited social networks for adults, children, newcomers, or international students), and public health (unaware of the services Public Health offers). Identified themes aligning with Public Health's mandate included newcomer orientation, services navigation, cultural and social support, physical activity and lifestyle, and food and nutrition.

A brainstorming session with Public Health staff highlighted challenges they brought forward, such as an increased number of newcomers to serve, fully understanding the needs of immigrants, and international students, struggles they believe community members have in accessing high-quality foods, insufficiency of psychiatric service, and limited health insurance coverage for international students.

Future considerations for Public Health include:

- Developing an information package about newcomers for frontline staff.
- Assisting interested associations in completing grant applications for initiatives that may fall under Public Health's mandate.
- Developing information and awareness sessions for community members and newcomers on Public Health programs and services.
- Maintaining involvement with external partners to support inclusion, anti-racism, and anti-oppression.
- Collection of socio-demographic data when providing services to clients.

Introduction

This report is a follow up to previous informal consultations with members of the Black communities in the City of Greater Sudbury to understand better their unique needs and connections to Public Health. The consultation results were shared internally with Public Health Sudbury & Districts (Public Health) frontline staff, and this report consolidates the main information gathered from the consultation, as well as the results of the consultation with frontline staff to improve service delivery. It includes the main points of the community consultation such as typologies of Black communities' organizations, their main activities, and key themes of what was heard from the community. Additionally, the report covers the challenges, needs, and realities of those who participated in the consultations, as well as the recommendations reported by Public Health frontline staff.

Background

In past years, there has been an increase in the racial and ethnic diversity in Sudbury and districts. As indicated in Table 1, in 2016, in Greater Sudbury, 1460 residents for a total of 23.4% out of the total visible minority population of 5990 identified as belonging to the Black community. In 2021, the number of residents that identified as Black had increased to 4030 for a total of 37.2% out of the total minority population of 10825, making the Black population the largest visible minority in Greater Sudbury.

However, this community faces health inequities, which Public Health is committed to addressing. Public Health has implemented various initiatives, such as the *Racial Equity Action Framework* and the *Partnership to Address Racism* launched in 2019.

Table 1: Black Canadians in Greater Sudbury (2016 to 2021)

Population by visible minority group and median age, Greater Sudbury / 2016 and 2021								
	2016				2021			
	Number	% of total population	% of visible minority population	Median age	Number	% of total population	% of visible minority population	Median age
Total - population	158 665	100	...	41.7	163 030	100	...	42.8
Total visible minority population	5 990	3.8	100	31	10 825	6.6	100	26.6

South Asian	1 460	0.9	24.5	31.9	3 100	1.9	28.7	25.8
Chinese	980	0.6	16.4	32.5	985	0.6	9.1	32
Black	1 460	0.9	24.3	29.2	4 030	2.5	37.2	
Filipino	355	0.2	5.9	36.6	440	0.3	4.1	
Arab	610	0.4	10.2	28.6	340	0.2	3.1	36.4
Latin American	270	0.2	4.6	38.2	705	0.4	6.5	32.8
Southeast Asian	325	0.2	5.4	26.1	400	0.2	3.7	34
West Asian	115	0.1	1.9	32.4	145	0.1	1.3	38.4
Korean	90	0.1	1.5	28.2	160	0.1	1.5	33.2
Japanese	90	0.1	1.5	31.2	85	0.1	0.8	14.9
Visible minority, n.i.e.	60	0	1	33.5	170	0.1	1.6	25
Multiple visible minorities	170	0.1	2.8	22.6	265	0.2	2.4	28

As indicated in Table 2, the Black population in Greater Sudbury is very diverse, with many recent arrivals immigrating from South Africa, Nigeria, Dominican Republic, Cote d'Ivoire, and Sudan. These numbers are not reflective of the many international students who identify as Black who also study in our three post-secondary institutions.

Table 2: Top birthplace of recent immigrants

Top places of birth of recent immigrants, Greater Sudbury / Grand Sudbury, 2016 and 2021						
	2016			2021		
	Number	%	Rank	Number	%	Rank
Recent immigrants (2016: 2011 to 2016 / 2021: 2016 to 2021)	1 000	100		1 635	100	...
India	170	16.9	1	320	19.5	1
Côte d'Ivoire	30	3	8	220	13.4	2
Nigeria	0	0	0	115	7	3
Philippines	85	8.5	2	95	5.8	4
United States of America	75	7.5	4	75	4.6	5
China	60	6	6	75	4.6	5
South Africa, Republic of	0	0	0	45	2.7	7
Pakistan	80	8	3	45	2.7	7

Dominican Republic	0	0	0	40	2.4	9
Sudan	0	0	0	40	2.4	9

Racial Equity at Public Health Sudbury & Districts

In 2019, Public Health Sudbury & Districts expressed its commitment and support for Ontario's 3-Year Anti-Racism Strategic Plan, "A Better Way Forward" by creating and implementing the [Racial Equity Action Framework](#) for Improved Health Equity ([Board Motion #32-19](#)).

The Racial Equity Action Framework was developed collaboratively to guide the organization's efforts to advance racial equity. That same year, Public Health, in partnership with Laurentian University and the City of Greater Sudbury's Local Immigration Partnership became one of the lead agencies on a community-based initiative to address anti-Black racism.

Efforts to engage the Black community aligned with the Ministry of Health and *Long-Term Care Health Equity Guideline*, 2018 that acts as a guide for advancing health equity work, in particular Requirement #2:

- Modify and orient interventions to decrease health inequities by:
 - a) Engaging priority populations in order to understand their unique needs, histories, cultures, and capacities.
 - b) Designing strategies to improve the health of the entire population while decreasing the health inequities experienced by priority populations.

Even though the global COVID-19 pandemic delayed Public Health's efforts to advance racial equity and anti-Black racism, Public Health focused on a number of initiatives.

The first included informal meetings held in 2021, to better understand the needs and challenges of Black communities, to identify any outstanding barriers to current vaccine uptake among priority communities and to support the Public Health COVID-19 vaccination program. COVID-19 exposed the health and social inequities that were disproportionately experienced by Black people, and it showcased the importance of implementing initiatives that engage Black communities on their health and well-being.

The second initiative was to engage Black influential leaders and community members in Sudbury through a series of informal meetings. The purpose of these meetings was to foster meaningful relationships, gain a deeper understanding of the primary activities and concerns of these groups, and identify ways in which Public Health can best support them.

As important as it was to engage the community, Public Health also needed to reflect on its own experience in working with Black communities and understand its own internal practices to better support the community and the engagement work going forward.

The specific objectives of these three consultations included:

- Understanding the current state of the Black community in Sudbury.
- Assessing the views of the community on Public Health programs and services.
- Obtaining feedback on how Public Health could assist the community.
- Gaining an informed perspective of the challenges faced by this community, in particular, its newcomer group.

Findings from the consultations will be used to provide greater context and insights for future discussions, planning, and engagement with the Black community.

Methodology

The COVID-19 pandemic illustrated the critical importance of having a public health system to address ongoing population health concerns and issues. To start a conversation on what the public health system can entail, it was important to hear first-hand insights and experiences from Black community leaders and members. This approach aligns with the *2018 Ministry of Health and Long-Term Care Health Equity Guideline*, which emphasizes engaging priority populations in order to understand their unique needs, histories, cultures, and capacities.

Different approaches were used to gather input, these involved:



Community consultations conducted between November 2022 and January 2023.



Interviews (telephone or virtual) with a total of 12 Black influential leaders and community members.



A total number of 5 Black-owned organizations and businesses that cater to Black communities were interviewed in the 2022 consultation. Another 4 community services that collaborate closely with Black communities were also consulted.



An internal brainstorming session with Public Health staff representing the Vaccine Preventable Diseases and COVID-19 Vaccination Division, Health Promotion Division, Knowledge and Strategic Services Division, and Health Protection Division.

This report provides a summary of the key themes from these discussions.

PRIORITY POPULATIONS

Those who are experiencing or at increased risk of poor health outcomes due to:

- ✓ the burden of disease and / or factors for disease
- ✓ the determinants of health, including the social determinants of health, or the intersection between them

Findings of Community Consultation

Typology of the Black Communities' Organizations

Initial agency engagement efforts determined that the community organizations that gather most Black people in Sudbury can be classified into four broad typologies:

- Associations from one nationality (for example, Haitian, Nigerian, Congolese, Ivory coast, Chad, etc.)
- Associations from several nationalities (for example, Afro-Heritage Association of Sudbury (AHA), Laurentian's African and Caribbean Student Association (LUACSA), Afrofest Sudbury, Black Lives Matter)
- Black owned businesses that offer unique products and services to meet the local needs of many Black communities (for example, Sudbury Tropical Market, Sudbury African Market, Miteo's Afro-Caribbean Food Store and Beauty Supply, Cuisine Tropicale, barbershop, etc.).
- Community services that work for or collaborate with Black communities (for example: Centre de santé communautaire du Grand Sudbury (CSCGS), Communauté francophone accueillante Sudbury – CFA, Réseau du Nord, Contact Interculturel Francophone de Sudbury, The Northern Ontario Black Economic Empowerment Program (NOBEEP).

Main Activities

The primary activities of each organization fall under five themes / categories below.

	Social Supports
	Resettlement Supports
	Cultural Activities and Leisure
	Social Networking
	Enterprise Development

A short description of each category has been provided below.

For the community, **social support** consists of helping people navigate through the health, education, and community resources system, promotes cultural and economic inclusion such as celebrating joyous events (birthdays and new arrivals), as well as providing support during

unfortunate events such as a death in the family. Additionally, social support includes clothing drives and fundraisers, as well as assisting with integration into the city to help combat feelings of loneliness.

Resettlement support primarily consists of welcoming and supporting new arrivals, providing orientations, and helping them find suitable accommodations. Other forms of support may include helping with shopping, visiting to prevent isolation, providing financial assistance, welcome packs, gift cards, and mentoring for children.

As for **cultural and leisure activities**, they entail organizing physical activities like soccer and leisure activities such as camping and beach trips. Additionally, events such as Black History Month, galas, Afro Fest, African cabaret, National French Immigration Week, and blood donations are also part of cultural activities and leisure events.

Social networking involves bringing individuals together for regular meetings, inviting folks to connect on social media platforms such as WhatsApp, Facebook, Instagram, and email to network with others. Fundraisers are often organized as part of social networking.

Enterprise development comprises grocery stores that offer food, hair and cosmetic products, hair services, jewelry, and clothing. Restaurants that provide African and tropical meals, barbershops for men's haircuts and hair styling, and the Northern Ontario Black Economic Empowerment Program for business and enterprise development are also part of enterprise development.

Key Themes of What We Heard

To ensure that a wide variety of community members were consulted as part of this process, staff reached out to community leaders from various countries such as Nigeria, the Democratic of Congo, Cote d'Ivoire, Haiti, Chad, Burkina Faso, Cameroon, Rwanda, and Burundi, as well as local organizations like the Laurentian University African Caribbean Students Association, Afro Fest, and Black Lives Matters.

Additionally, Public Health staff connected with businesses that cater to Black communities such as the African Tropical Market, Sudbury Tropical Market, Miteo's Afro-Caribbean food store and beauty supply, Cuisine Tropicale, and private health care. Public Health staff also established contacts with community services like Centre de santé communautaire du Grand Sudbury, Welcoming Francophone Communities initiative, Northern Ontario Francophone Immigration Support Network, and Northern Ontario Black Economic Empowerment Program.

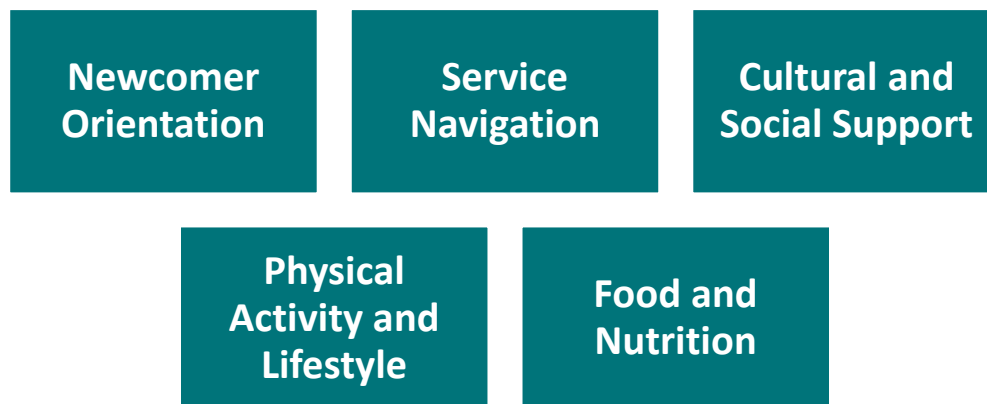
What we heard about the concerns expressed by participants varied greatly depending on the organization or community member, and has been summarized in the table below:

Health / community resources	Access	Support	Public Health
• Information concerns • Few physical activity / leisure opportunities	• Financial resources • Family physicians • Transportation • Employment • Housing	• Limited social networks for adults, children, newcomers, or international students	• Unaware of the services we offer

The concerns raised are as follows:

- A variety of community resources are lacking or difficult to access for many individuals. Some common issues include a lack of information on available resources and difficulties with finding physical activity or leisure opportunities. Additionally, local community associations may struggle to stay afloat due to limited fundraising opportunities and have difficulty keeping members engaged. Unemployment and poverty are also major issues, with long working hours and a lack of work-life balance being common concerns. Finally, credential recognition can be a significant challenge for many individuals seeking employment.
- Access to resources can also be a challenge, with discrimination, racism, financial and transportation barriers being common. Additionally, linguistic challenges can be faced by Francophones, and food nutrition resources may not align with the traditional culinary preferences and choices of Black or immigrant individuals. Members may have great mobility challenges and struggle to maintain consistent access to necessary resources.
- Social support can also be a challenge, with limited social networks and weak networking opportunities. Newcomers may struggle to find references or proof of credit when looking for housing and may face discrimination and poor integration. Loneliness and isolation can also be common issues, and international students often lack adequate support. Finally, some parents may struggle to navigate the challenges that their children face at school.
- Public Health services may also be underutilized, with many individuals being unaware of the services that are available.

Specifically, regarding health, five themes have also been identified as shown below:



- **Newcomer Orientation:** As a newcomer in Canada, it can be overwhelming to navigate the cultural and societal differences, workplace culture, education system, and retirement process. Additionally, many newcomers may not be aware of the main health concerns among Canadians or the role of public health services. However, events that promote public health services and explain how they work within the health system can help bridge this gap.
- **Services Navigation:** Navigating the healthcare system and accessing social services and community resources can also be a challenge for newcomers. It is essential to know how to access family doctors, nurse practitioners, and Ontario Health Insurance Plan (OHIP) cards. Of note, temporary residents may have limited access to services compared to permanent residents.
- **Cultural and Social Support:** It is crucial for newcomers to feel welcomed and integrated into the local community. Access to local social and cultural events can help newcomers feel more at home.
- **Physical Activity and Lifestyle:** Newcomers may experience barriers to physical activity due to low physical literacy, a lack of social support, language barriers, program costs, and a lack of culturally appropriate options, as well as family responsibilities, lack of energy, time, and commitment.
- **Food and Nutrition:** Newcomers to Canada often face challenges related to food and nutrition. These challenges can include food shock due to unfamiliarity with local products and cooking styles, a lack of understanding of the Canada's Food Guide, and a lack of money to access healthy foods.

Findings of Brainstorming Session with Public Health Frontline Staff

In addition to connecting with community organizations, business owners, and services that serve or work with Black communities, we held a brainstorming session with frontline staff to gain insight into their experiences working with Black communities. We discussed the challenges they face with service delivery, the needs and realities of clients, and areas where they are seeing success. We also explored opportunities to help improve services for these communities.

The following key points were reported by frontline staff:

- Nearly half of the growing family health client population consists of newcomers, immigrants, and international students.
- Newcomers often struggle to access high-quality foods and adjust to new food sources, which can lead to health challenges like diabetes, hypertension, and high blood pressure.
- There is a lack of services to support accessing good dietary care, quality food sources, and international services.
- Many refugees move through Canada frequently, but there are few local services that can support trauma-informed practices and meaningful treatment for post-traumatic stress disorder, which is not covered by OHIP.
- Wait times for psychiatric care can be lengthy, and there is a large gap between the services available in Sudbury compared to larger metropolitan centers like Toronto and Montreal.
- Public health services are free for services related to sexual health and vaccine-preventable diseases, but referrals for additional services or hospital care require an OHIP card or payment.
- Some students have limited health coverage, and their families may not have any health coverage at all.
- There can be confusion about vaccines, and insurance is necessary for prescriptions like birth control and anti-anxiety medication. Those without insurance may be unable to have their prescriptions filled.



Access to food



Access to mental
health supports



Limited health care
coverage



Vaccine and
prescription drug
supports

As to address the challenges identified on the frontline, service providers recommended the following:

- Identify key focus areas to support Black communities and newcomers, such awareness of public health programs and services, mental health supports, access to health care, social support, and participation in community events and activities.
- Collaborate with additional teams, such as the Mental Health and Substance Use team, to identify gaps in mental health services and opportunities to strengthen mental health promotion strategies.
- Share our engagement efforts at internal knowledge exchange opportunities, such as symposiums or smaller knowledge exchange sessions.
- Distinguish the needs and differences between Black communities and newcomers, as they may not always be the same.

Overall frontline service providers suggested focusing on increasing awareness of mental health, health care access, social support, and community participation. Collaboration with other teams and sharing engagement efforts is key.

Regarding opportunities to partner and collaborate to address the identified frontline challenges, service providers recommended collaborating with:

- Black associations
- Black-owned businesses
- community service providers that work for or collaborate with Black communities
- education and post-secondary schools
- other health care providers (Centre de Santé Communautaire du Grand Sudbury, Hospital, etc.)

These suggestions occur in a context wherein Public Health is already actively involved with the Local Immigration Partnership, which brings together various stakeholders committed to welcoming and retaining newcomers in Sudbury. Additionally, Public Health has undertaken projects focused on racial equity, such as allyship training on racism and engaging with the community on COVID-19 vaccine distribution.

Future Considerations

Results from the consultations highlight recommendations that go beyond Public Health Sudbury and Districts' mandate and require multi-sector collaboration. However, it would be worthwhile for Public Health to consider:

1. Implementing the collection of socio-demographic data when providing services to client.
2. Developing an information package about newcomers for frontline staff.
3. Assisting interested associations in completing grant applications for initiatives that may fall under Public Health's mandate.
4. Maintaining involvement with external partners to support inclusion, anti-racism, and anti-oppression.
5. Developing information and awareness sessions for community members and newcomers on Public Health programs and services.

Considerations in favour of multi-sectoral efforts:

1. Extend the plan and our actions to include other priority populations, such as other racialized people, international students, people who have substance misuse challenges, people who struggle with positive mental health, individuals from the 2SLGBTQ+ community etc.
2. Raise awareness about health insurance being a barrier for communities, and advocate for greater acceptance of Blue Cross forms of payment by local physicians. This includes understanding the barriers to physicians accepting this insurance, as well as the administrative requirements of the Ministry of Health. This also includes creating a listing of which diagnostic costs can be billed and their associated costs.
3. Support cultural engagement activities (social and cultural events such as community walks, festivals, and celebrations).
4. Build capacity for service provider knowledge of culturally appropriate food, including food guides for diabetes and information on available food, how to access it, and how to cook it.
5. Partner with the Black community to encourage ease of access to physical activities and leisure opportunities such as swimming, skating, skiing, and snowshoeing.

Conclusion

Through consultations, it has been shown that individuals belonging to the Black community often face significant challenges related to orientation, cultural and social support, physical activity, and lifestyle. Additionally, they are not adequately informed about Public Health's services and mandate. The frontline staff have identified various key focus areas to support Black communities and newcomers, including internal and external collaboration, internal knowledge exchange opportunities, and more information about the Black community. Overall, these findings strongly reinforce the need for increased services and support for members of the Black community and newcomers.

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