

The "Pop-Up" Hub: A Service Coordination Model

The Toronto North Local Immigration Partnership (TNLIP)

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Pathways to Prosperity, December 2016

BACKGROUND

Toronto is a primary destination for immigrants and almost half of the Toronto population is foreign born. Comparatively, more immigrants settle in North Toronto (53% of the total population; 7% more than the city average).

Immigration, Réfugiés et Citoyenneté Canada

The majority of newcomers (72%) find employment within the first six months of arrival but six out of ten of them work in survival jobs. The rest (four out of six) are either managing their households or studying to upgrade their skills (26%). A very small proportion (2%) find employment in their professional fields.

Considering the precarious employment status of newcomers, schooling and socio-cultural and linguistic barriers in accessing services, the Health & Wellbeing group of the Toronto North Local Immigration Partnership (TNLIP) decided to a pilot a "pop-up hub" - a service coordination model - in one of the neighbourhoods in the Toronto North Quadrant. The rationale behind the "pop-up hub" model is to make services accessible to newcomers through a mobile multi-sectoral team of community agencies meeting people where they are, i.e. offering services at a convenient place (e.g. food bank) at a convenient time (evenings/weekends) and in the appropriate languages.

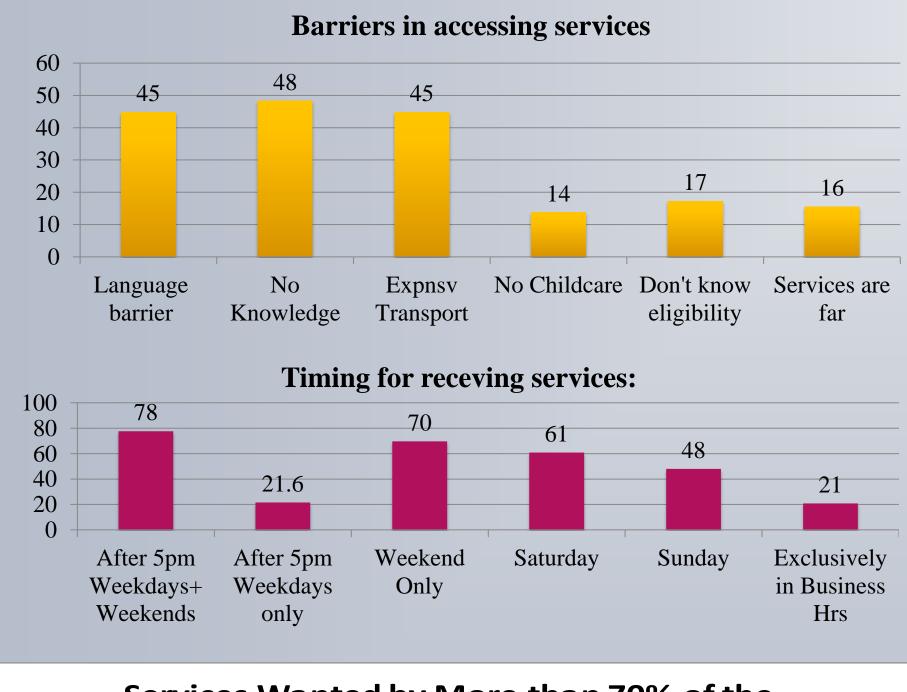
The TNLIP Health & Well-being Workgroup established a task group composed of service providers from various sectors (health, settlement, legal services, etc.). The task group started off by conducting a survey in the neighborhood where the model will be piloted to find out the needs for services, access barriers and appropriate times for receiving services.

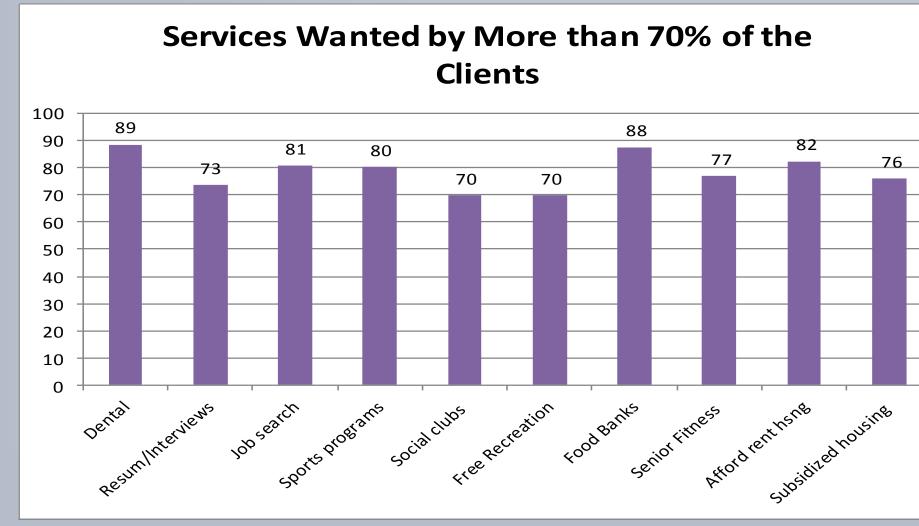
PRE-IMPLEMENTATION SURVEY

Before piloting the "hub", the task-group conducted a survey among the clients of a local food bank in the pilot location. In total, 181 residents were surveyed. The respondents noted the need for health services (especially dental), as well as settlement, legal, employment, housing and food services.

According to the survey results, the main barriers in accessing services are: lack of knowledge about the availability of services, language barrier and transportation cost. Around 78% of the respondents expressed the need for services after business hours (in the evenings and on weekends).

The charts below show the needs for different services, barriers in accessing services and appropriate timing for receiving services.





IMPLEMENTATION

The Pilot Phase

Based on the results of the survey, the group conducted a "pop up hub" at the local food bank in the evenings (after business hours). Services included: health, mental health, settlement,

employment, housing, and legal services. Six rounds of the pop-up hub were conducted in four months (Feb – Apr 2016), two in each month. Around 331 clients were served, including 91 Syrian newcomers. The services included providing information and referring clients to the services they needed. Interpretation was provided as needed.



The model received excellent rating from the participating agencies and residents. The residents noted that they had learned about the services available in the community that they did not know about before the "hub". The service providers were amazed at how they were able to serve so many clients in such a short period of time.

The Roll-out Phase

In spring 2016, after the successful implementation of the first six rounds of the pop-up hub, the task group decided to roll out the pop-up hub to the communities with high



concentration of newcomers and limited number of service providers. The first popup hub was conducted in October 2016 at The People's Church (TNLIP member agency) and was focused on refugees living in shelters and people without health insurance. Around 80 clients received various on-site health and social services. The health service providers included a physician, an ophthalmologist, a dentist, a

community oral health specialist, staff from family and sexual health services, an immunization specialist, a team from the women's health centre, a mental health professional, nutrition and diabetes specialists and nurses performing screening and referrals. Community services included legal, settlement, housing and employment services. More than 80% of the clients rated the event as excellent. Dental, family physician and ophthalmology services were rated as the most useful.



Interpretation was available in Mandarin, Hindi, Farsi, Urdu and Arabic.





The pop up hub, which was piloted at the local food bank, resumed full-scale in October 2016, after the summer break. Services included health, settlement, legal, employment, library, parks and recreation and housing services. Around 110 clients including 30 Syrian newcomers were served in two rounds in October.

The task group in partnership with the Griffin Centre and Bathurst-Finch Inter-agency Network is currently planning a pop-up hub that will focus on the needs of the LGBTQ community and the uninsured. Around 80 residents are expected to participate. The services will include mental health, general health, family and sexual health, harm reduction for LGBTQ community, settlement, employment and more. Transportation, lunch and refreshments will be provided by the partners.

Another pop-up hub will be conducted specifically for the Syrian newcomers in 2017.

CONCLUSIONS

- Newcomers start working (mostly in survival jobs) soon upon arrival to Canada to support themselves and their families. Some newcomers start studying to upgrade their skills or to begin a new career. Many have to juggle two jobs or a job and a school (i.e. language classes). Therefore, they are unable to access employment, settlement, health and other services during the regular business hours.
- Making a variety of social services available to newcomers at the convenient time and place using the pop-up hub model increases their access to services, and, as a results, improves their settlement and integration outcomes.
- This model allows the participating service providers to reach out to the vulnerable population groups and increase the demand for their services in the community.
- Pop-up hubs can be tailored to the needs of different communities and newcomer groups with the help of a pre-implementation needs assessment survey.

CHALLENGES

- Since the "hubs" are run outside business hours, engaging service providers could be challenging due to their busy schedules and unionized environments.
- Outreach and event promotion using conventional methods poses a challenge. There should be enough time for promoting the "hub", and different communication channels (e.g. community animators, local businesses) should be used.
- There are around 150 different languages spoken by newcomers in Toronto, thus, it is difficult to arrange for interpreters for all language groups. The preimplementation needs assessment survey helps to identify the key language groups spoken in the specific communities, making it easier to plan for interpretation.
- Sustaining the pop-up hubs is another challenge, as the task group and other local partners require a "backbone" organization to support the process. The TNLIP tries to play this role but it may not be possible once the model expands further due to the limited resources (i.e. staffing). Identifying the partners that would lead this process in different communities is key.

REFERENCES

- 1. The Global City, Newcomer Health in Toronto, Nov. 2009, Toronto Public Health & Access Alliance
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ACKNOWLEDGMENT

The TNLIP expresses gratitude to all members and partner agencies that contributed to the planning and the implementation of the pop-up hubs.