



Health Care for All: Practical strategies and advocacy opportunities for improving access to health care for medically uninsured people in Ontario

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Sarah Shahid and Nisha Kansal**

Alliance for Healthier Communities'
Annual Conference, June 4, 2025

Who we are and what to expect today



Rebecca Cheff

Knowledge Translation
Specialist, National
Collaborating Centre for
Determinants of Health



Shezeen Suleman

Midwife Team Lead, MATCH at
South Riverdale Community
Health Centre; Co-Chair of the
Health Network for Uninsured
Clients



Sarah Shahid

Coordinator, Healthcare
for All campaign, Decent
Work and Health
Network

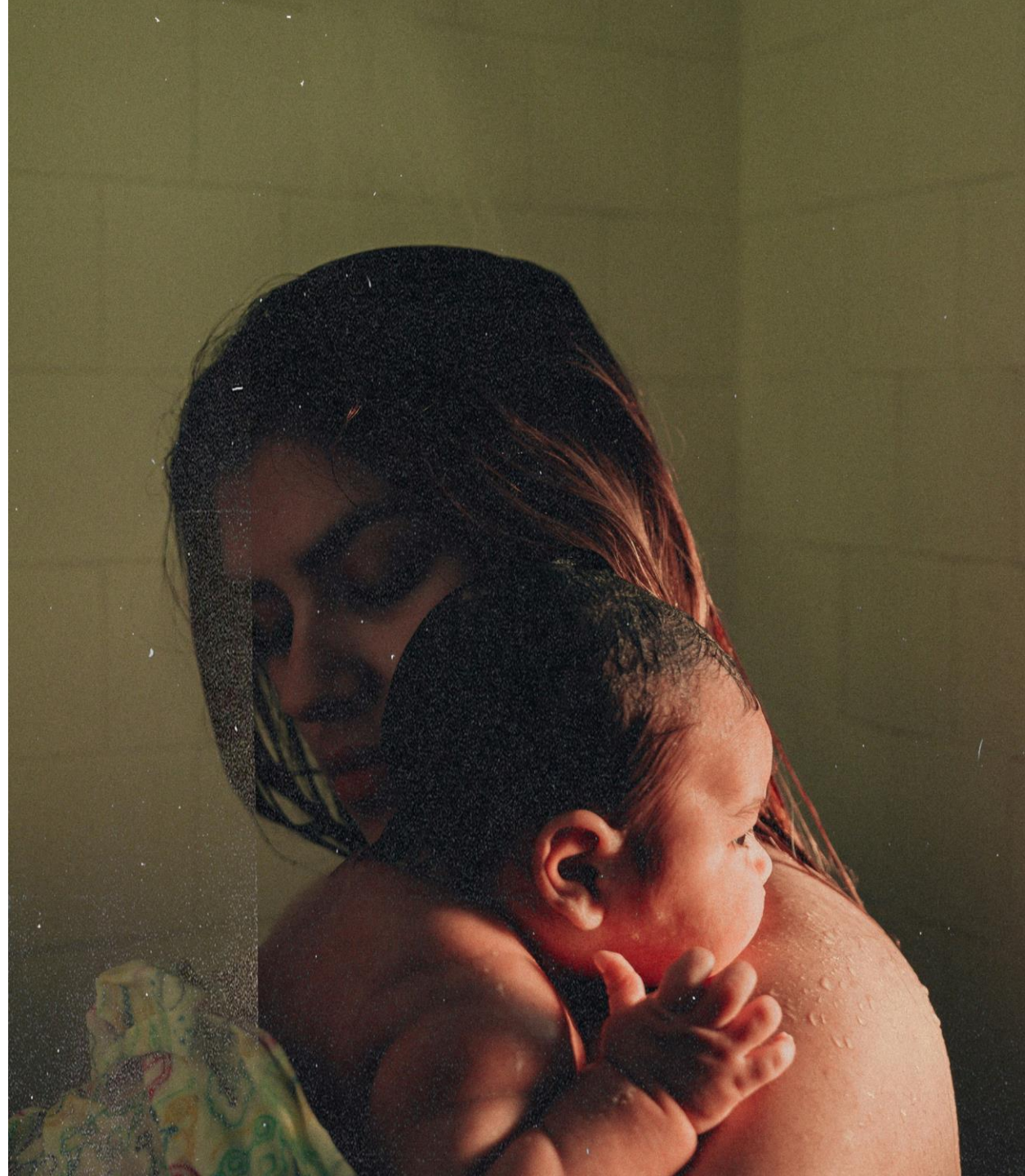


Nisha Kansal

Locum Family Physician,
Parkdale Queen West
Community Health
Centre

The right to health is a **human right**.

This means that everyone, based on their status as a human (not on their immigration status) should be able to access adequate healthcare and to live under conditions that allow them to stay healthy.

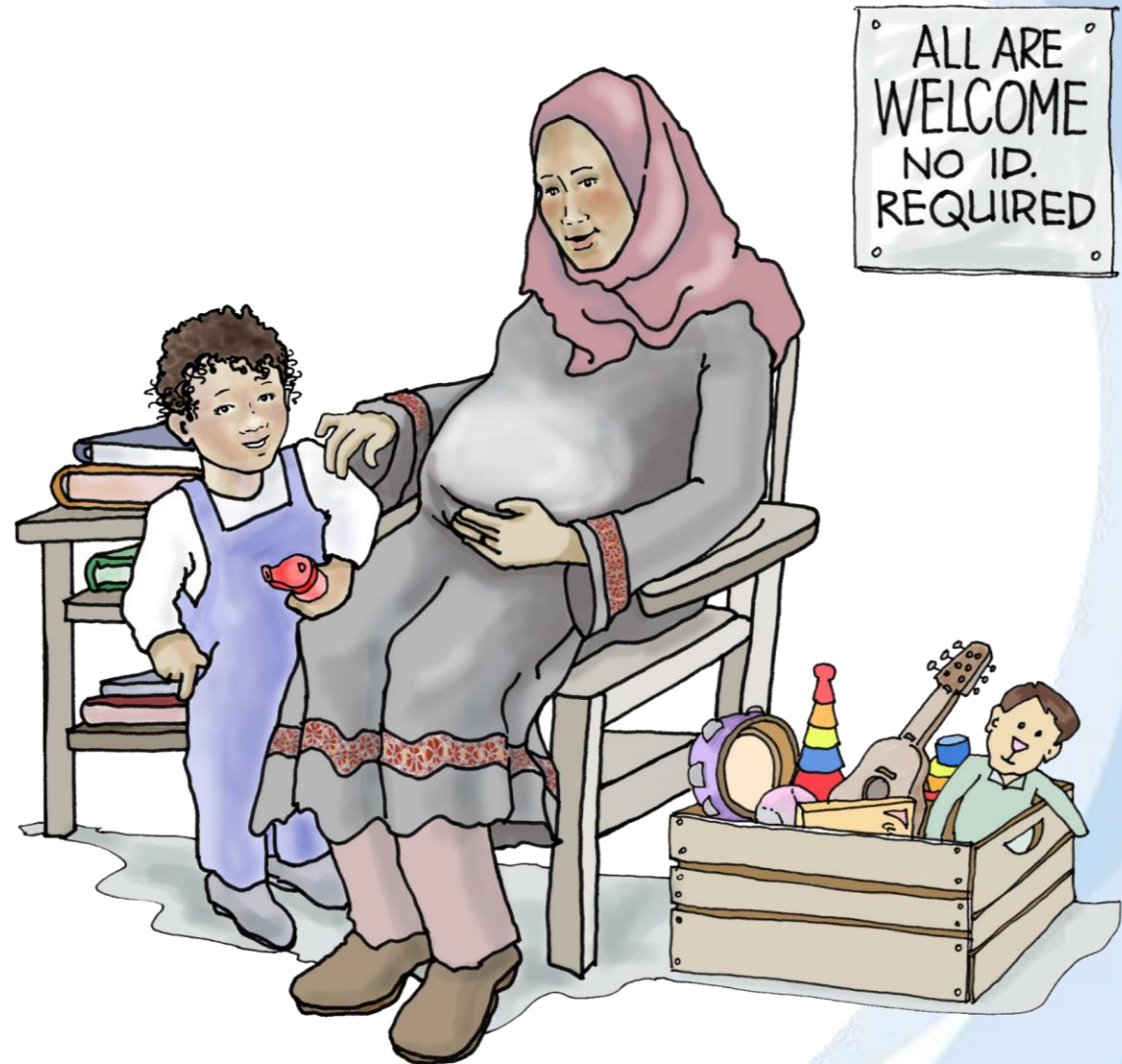




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for Determinants of Health

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des déterminants de la santé

Immigration status as a fundamental determinant of health



The National Collaborating Centre for Determinants of Health supports the Canadian public health community – and health system more broadly – to advance health equity.

Connect
with us



nccdh.ca



nccdh@stfx.ca



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Sign up for our mailing list



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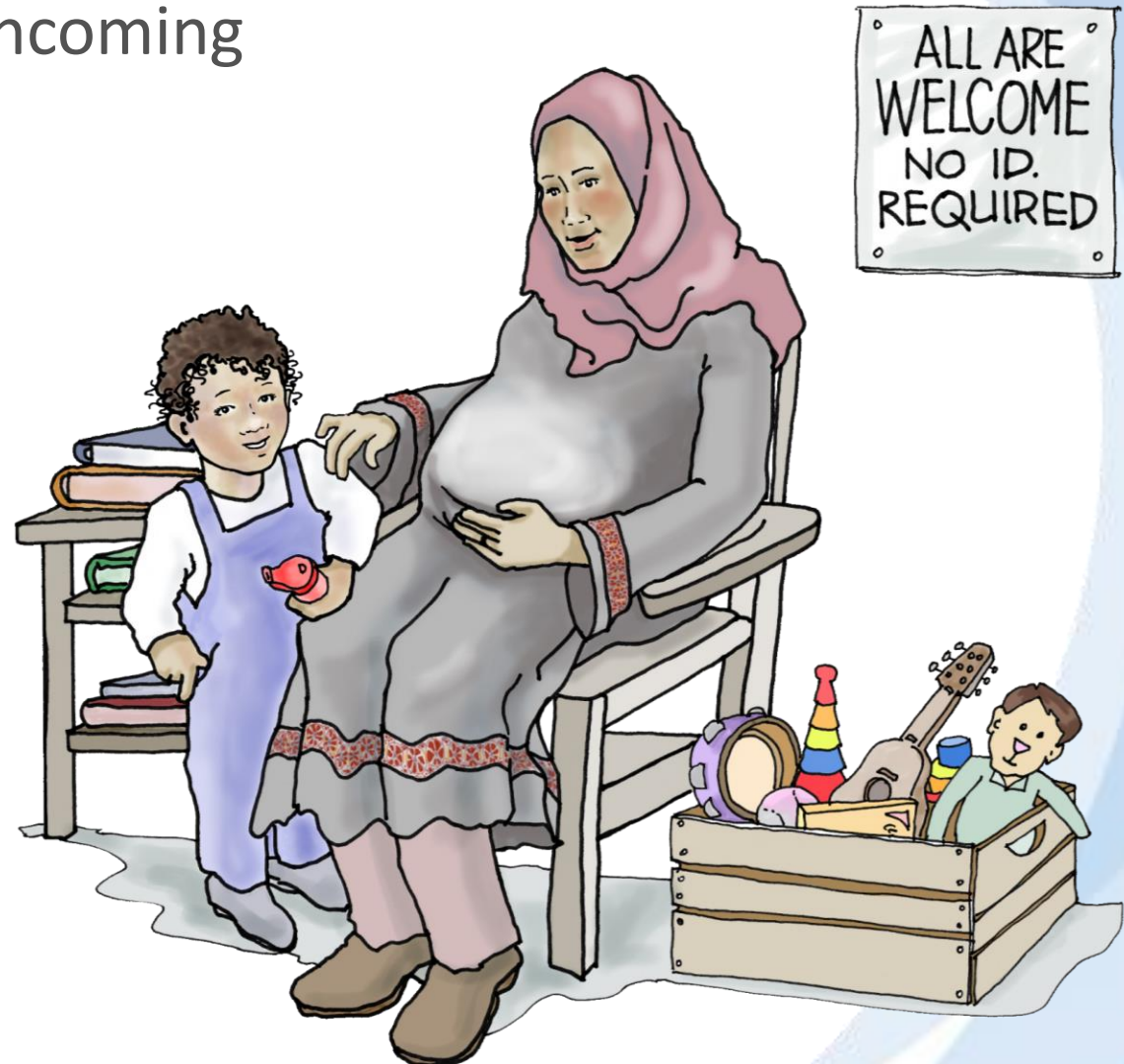
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Migrant health resources

- Migrant health issue brief (forthcoming summer 2025)
- Mind the Disruption podcast:
 - Disrupting for migrant work
 - Disrupting for health care for all

Migrant Health





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Key term: Medically uninsured

“Medically uninsured is an umbrella term used in Canada to refer to people who do not have publicly funded health insurance coverage through a provincial or territorial plan or through federal programs (e.g., Interim Federal Health Program).”



Key terms: Immigration status



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Permanent
resident

Temporary
resident

No status

Often
uninsured

Uninsured



Structural determinants

Laws and policies
(e.g., immigration system, temporariness, illegalization)

World views and beliefs (e.g., xenophobia, racism, anti-migrant sentiment)

Governance (e.g., economic exploitation)

Institutional practices
(e.g., invisibilization)

Social position

Denial of permanent resident status

Intersects with race, gender, sex, religion, country of origin, income, etc.

Social determinants

Work

Health care

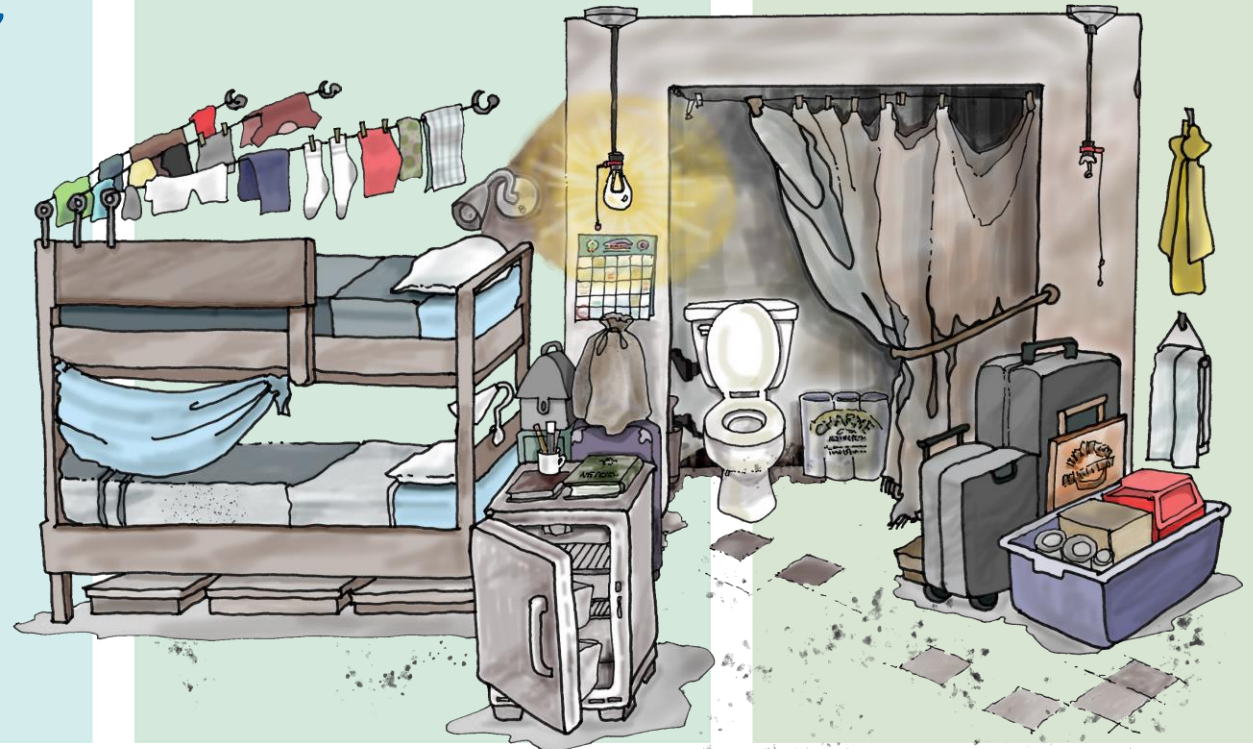
Housing

Other determinants

Health outcomes

Preventable injury, illness and death

Health inequities





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Health care for uninsured people

- No universal access health care unless you pay out of pocket
- Some limited pathways to free health care services:
 - Community health centres
 - Registered midwives
 - Some limited community clinics (often volunteer, donation and partnership-based)
 - (Some) public health services



Health care barriers

- Health care costs and fear of costs
- Fear that health care providers and institutions will share their *confidential* personal information with immigration authorities or police
- Xenophobic, racist, religious prejudice and discrimination



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Health care and health outcomes

- Less likely to access primary health care, prenatal care, emergency care and medications
- Experience lower quality of care, including reduced continuity of care, tests, referrals and follow-up
- Avoidable illness, injury and death

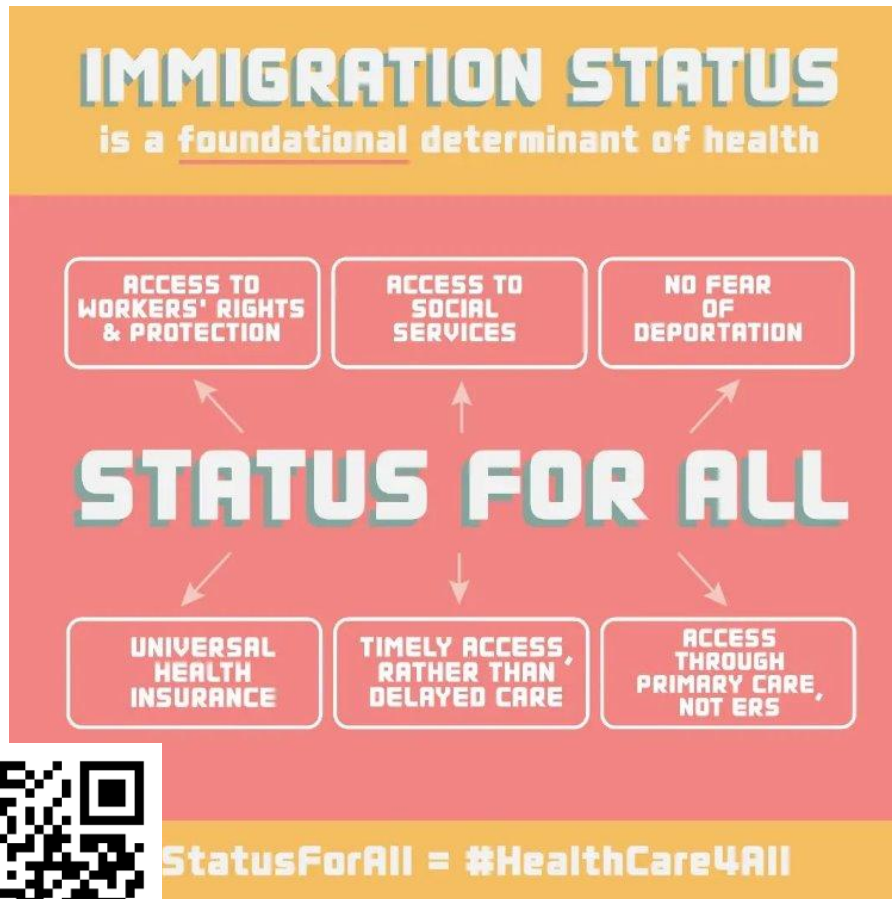




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Advancing migrant health and justice



Get involved and connect your clients
with the Migrant Rights Network

1. Recognize immigration status as a foundational determinants of health
2. Advocate for status for all, full protections and rights, and universal health care for all
3. Foster responsive and inclusive public health and health care systems



What proportion of your clients are uninsured?



**Advocating for
equitable access to
health care services
for everyone –
regardless of their
insurance or
immigration status.**



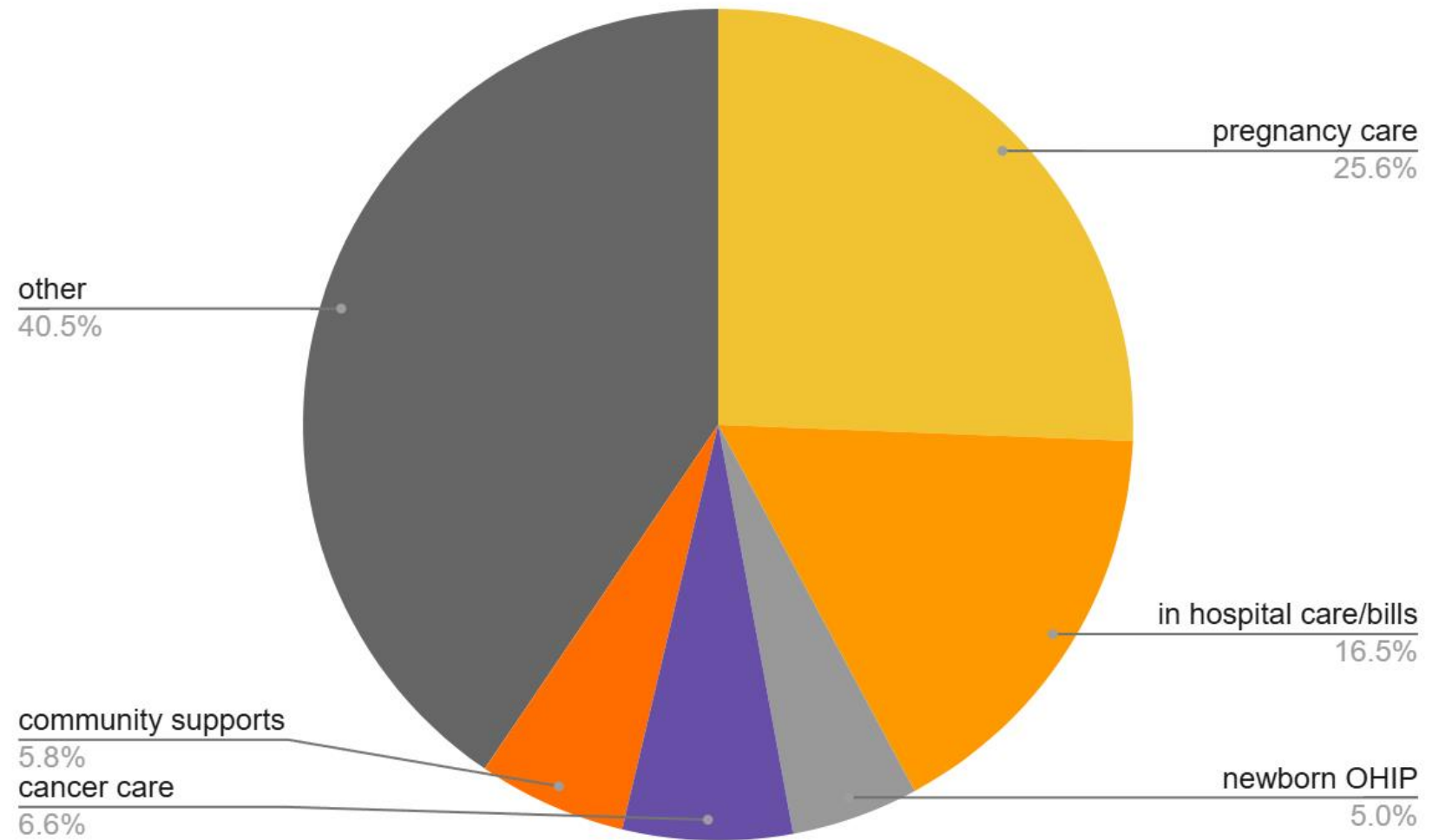
SCAN ME





What are some uninsured health care access issues you're seeing in your organization/community?

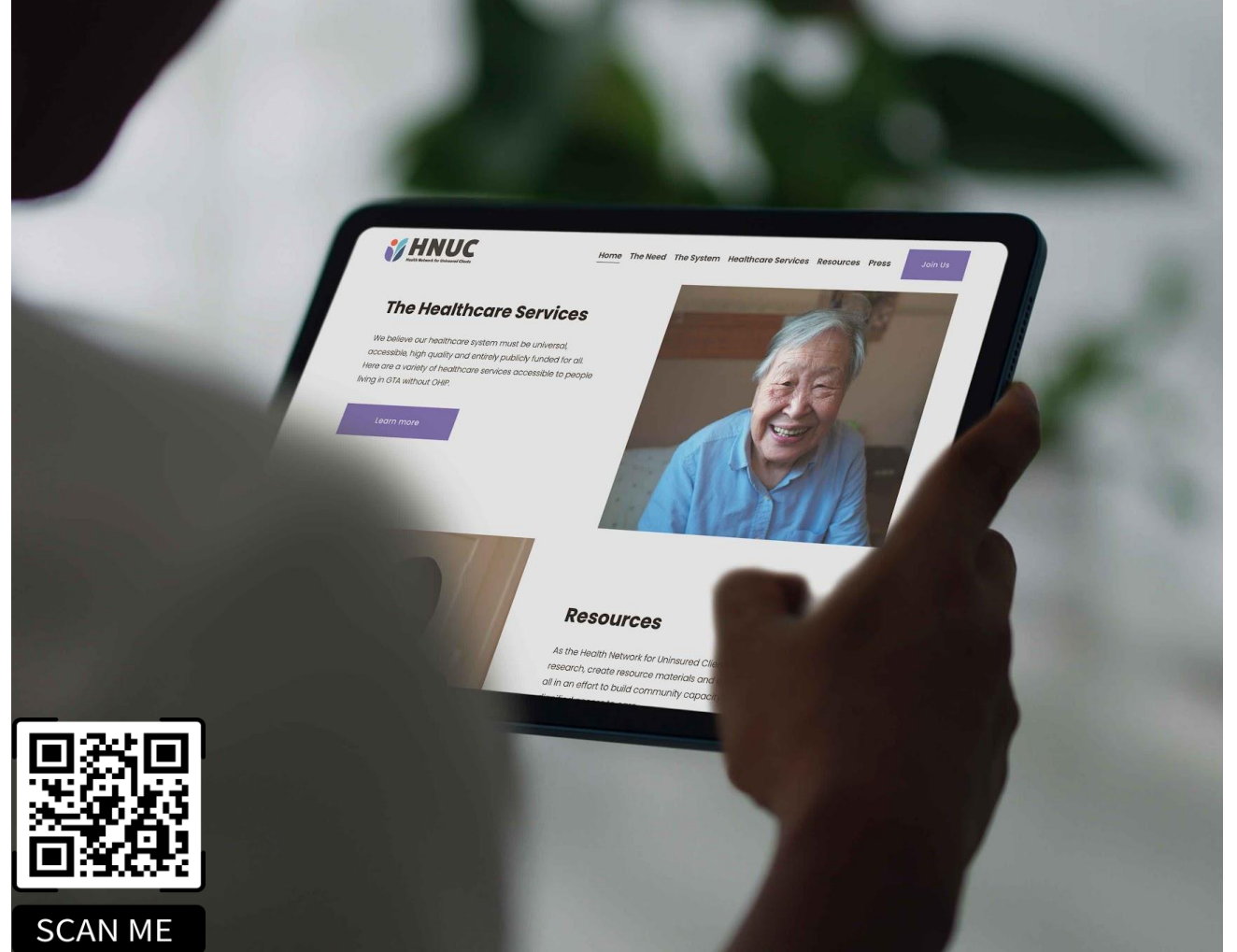
Rapid Response Cases Fielded: What we saw in 2024



Strategies for Service Providers



SCAN ME



From **inside** your organization:

Intake process and criteria

Building relationships with your local hospitals

Funding for uninsured health access



SCAN ME

Individual Level Strategies:

Get familiar with
healthcare access points
in your community

Accessing hospital-
based care: billing

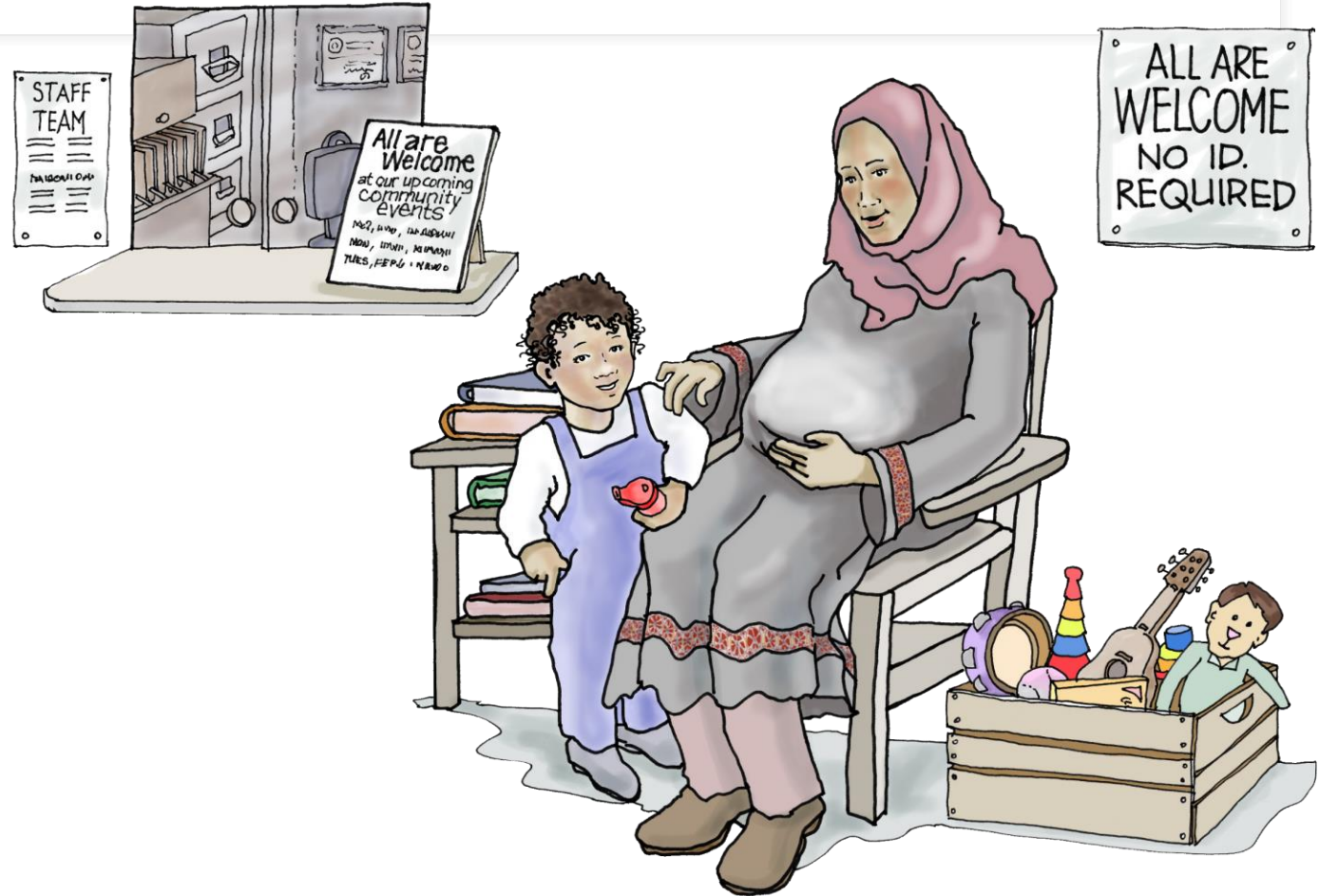


**Questions?
(5 minutes)**



Table discussion (10 minutes)

What are **strategies** you have used to improve access to care for uninsured clients?





What are strategies you have used to improve access to care for uninsured clients?

Who we are

Healthcare for All (H4A) is a campaign being advanced by health workers, community members, and migrant justice and health equity organizations, whose mandate is to fight for access to healthcare for all in Ontario and across Canada, regardless of immigration status.



Healthcare for all Demands

1. Restore the PHSUP (Physician and Hospital Services for Uninsured Program), as well as adequately implement and create awareness of the program
2. Extend OHIP (Ontario Health Insurance Plan) to include those without permanent resident status



**Everyone in
Ontario deserves
access to healthcare
regardless of
immigration status**

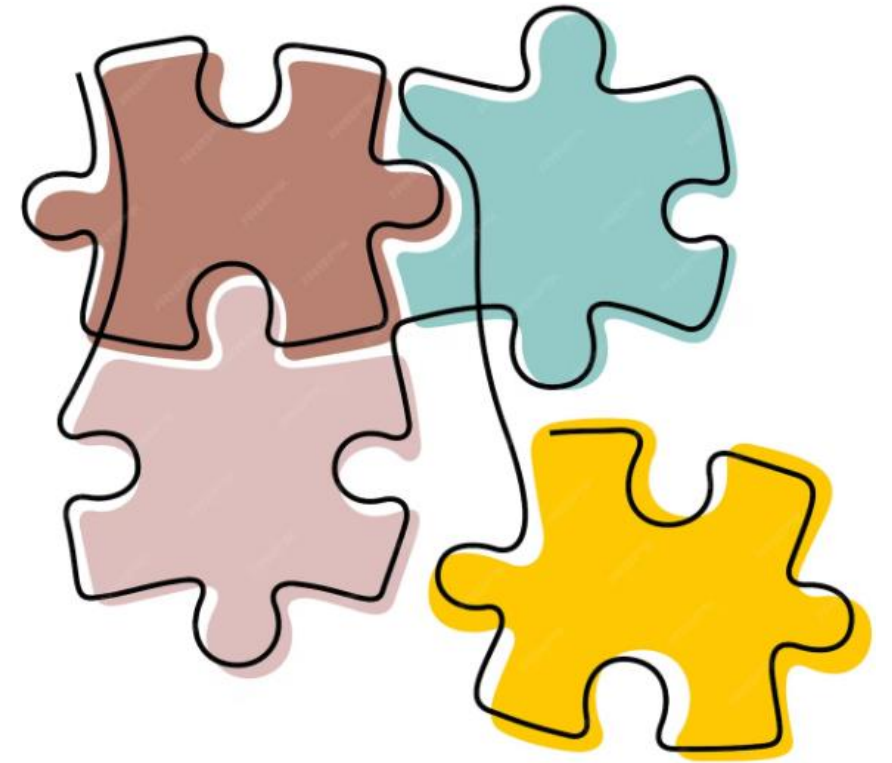
Email your MPP to demand universal
healthcare coverage for all

HEALTHCARE4ALL.CA

Why policy change is needed **NOW**

- Patchwork system
- Expensive care
- Precarious network of sympathetic specialists
- Exorbitant amounts of time on systems navigation, rather than providing medical care

Ultimately unsustainable system, induces burnout in providers, confusion for patients & providers alike





Irfan Dhalla
@IrfanDhalla

"Every medically necessary service needs to be covered in Ontario for anyone who needs it."

Thanks [@drrosezacharias](#) for your clarity and leadership.



ottawacitizen.com
Ending medical coverage for uninsured patients will harm vulnerable people, says Ontario Medical...

10:07 AM · Apr 2, 2023 · 5,620 Views



Dr. Adil Shamji
@ShamjiAdil

By cutting healthcare funding for uninsured people, [@SylviaJonesMPP](#) targets the vulnerable.

This is Ontario. This is Canada. Everyone deserves care.

This decision will financially drain public hospitals and drain dignity from patients.

It must be reversed.

[#onpoli](#) [#onhealth](#)



4:02 PM · Mar 28, 2023 from Toronto, Ontario · 13.7K Views

Health worker advocacy can make change

The crucial role of CHCs in this campaign

- CHCs are embedded in communities and see the impacts of lack of coverage in the day-to-day
- Winning OHIP for all will close gaps in health equality in our communities



Organizational Statements



Alliance for Healthier Communities

@AllianceON

Check out the statement by clicking the link:

allianceon.org/news/residents...



Alliance for Healthier Communities
Alliance pour des communautés en santé



association of family
health teams of ontario



Association of
Ontario Midwives
Delivering what matters.



A corporate member of NPAO

Nurse Practitioner-led Clinic
ASSOCIATION

Ontario College of
Family Physicians

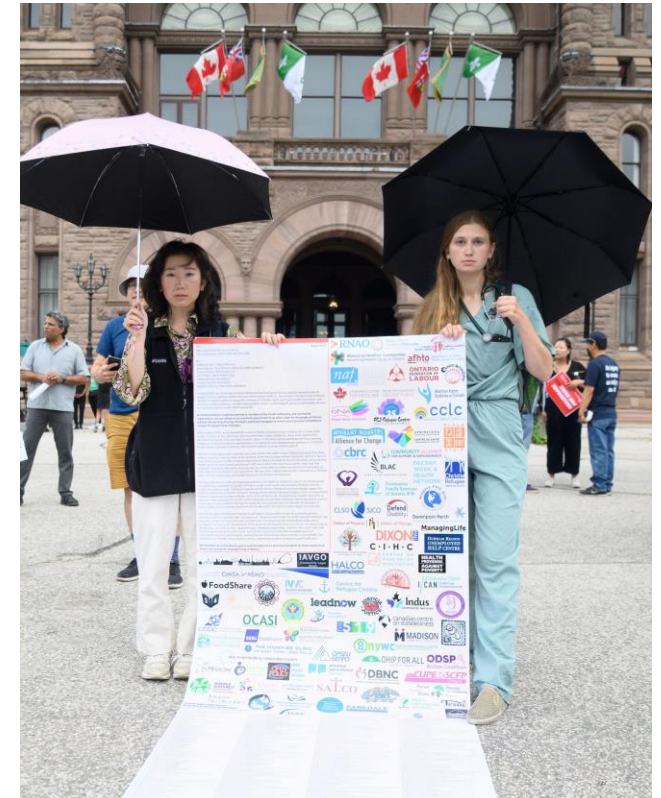


INDIGENOUS
PRIMARY
HEALTH CARE
COUNCIL



NURSE
PRACTITIONERS'
ASSOCIATION OF
ONTARIO

12:07 PM · Mar 30, 2023 · 132 Views



Openings

- Endorsement from Alliance for Healthier Communities
- Ontario Hospital Association recommends a program to close gaps
- Health Minister Sylvia Jones said last year that no one will be charged for emergency service in an Ontario hospital

WATCH LIVE

CityNews asked Health Minister Sylvia Jones about the medical bills undocumented people will often get.

In response, she said, “If you need emergency surgery in the province of Ontario, you will get it, and you will not be charged in an Ontario hospital. We have community health centres that are funded very specifically for individuals who are undocumented refugees and that work continues.”

The Ontario Hospital Association (OHA) said that cases differ and whether uninsured patients qualify for coverage depends on the “situation and context.”

“The OHA is working closely with its members and health system partners to address the health service gaps that remain for uninsured patients,” they said in their statement. “Ontario hospitals remain committed to ensuring equitable access to health care for all patients, including uninsured patients who play a key role in contributing to Ontario’s social and economic fabric.”



What does political advocacy mean to you?

YOU have the power to make change

Strategy	Action
Build pressure inside institution	<ul style="list-style-type: none">• Use storytelling techniques (e.g. social media videos) to put the campaign on your organization's radar• Create opportunities for education inside your institution• Identify health equity “champions” and build their confidence to advance this work (could be CHC ED, hospital CEO, OHTs, government relations or policy advisor person at your organization, MOH etc)• Pass resolution in your union or professional association
Create dialogue with policy makers	<ul style="list-style-type: none">• Meeting with MPPs, staff, Ministry of Health workers• Share research, reports & research publications with policy makers
Build partnership with other groups and communities	<ul style="list-style-type: none">• Work with local media, unions, faith groups, community organizations to educate, catalyze, break down barriers

Healthcare for all Demands

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HEALTHCARE4ALL.CA

Small group discussion (10 minutes)

1. Identify 2 people in your organization who you would talk to about Healthcare for All campaign. What's something you would want them to know?
2. What are other opportunities to bring the campaign back to your organization?



Advocacy tools

Sign up to join the campaign and access advocacy tools and resources!

- How to have effective conversations
- How to present evidence to your MPP
- Factsheet: Ontario needs Healthcare for All



@HealthForAllNow



@HealthForAllNow



healthcare4allcoalition@gmail.com

