



2021 Immigrant Health Outcome (IHOS) Survey Crosstabulation Report

Prepared by Victoria Chapman, Research Analyst
&
Kholah Nisar, Research Analyst

Community Services, County of Simcoe

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Introduction:

The 2021 Immigrant Health Outcome Survey (IHOS) Crosstabulation Report was developed as a supplementary document to complement the 2021 Immigrant Health Outcome Survey (IHOS) Summary Report. The Immigrant Health Outcome Survey (IHOS) Summary Report explores survey results for foreign-born individuals and looks at trends between immigrant (Permanent Residents and Canadian Citizens) and foreign student (current foreign students and former foreign students on a work visa) respondents. The 2021 Immigrant Health Outcome Survey Crosstabulation Report explores how demographic groups of interest differ based on responses to specific survey questions of interest.

Demographic Groups of Interest:

1. Status in Canada
2. Length of time in Canada
3. Gender
4. Income group
5. Income group by gender
6. Visible Minority group
7. Where respondents lived

Survey Highlights:

- Overall health
- Mental health
- Dental health
- Impact of settlement into Canada on overall health
- Life satisfaction
- Sense of community belonging
- Life stress
- Source of information about healthcare services
- Contact for primary healthcare needs
- Location of primary healthcare provider
- Helpfulness of information on how to access and navigate the healthcare system

For detailed information on the methodology, considerations, overall survey results, and next steps please refer to the 2021 Immigrant Health Outcome Survey Summary Report.

Data Interpretation Considerations

The n values for the demographic groups are included at the top of each table in the report as a reference, although the n values for each topic of interest vary because most questions were optional and included don't know and prefer not to answer options. For the purpose of this analysis *blank*, *don't know* and *prefer not to answer* options were excluded from the denominator unless they made up a large portion of responses.

The Chi-Square Test of Independence was used throughout this analysis to determine statistical significance of results and is noted within the text portion of the report.



Results

1. Status in Canada

Canadian citizens, permanent residents, current study permit holders, and past study permit holder, currently on work permit visa were included in the survey. The two groups of foreign students (current study permit holder or past study permit holder, current work permit visa) and immigrants (permanent residents or Canadian citizens) were examined to see how responses to survey highlights differ to better understand the unique needs of each group.

Several statistically significant differences were detected between the survey highlights and status in Canada, using a Chi-square test for independence.

Immigrant respondents were more likely than foreign student respondents to:

- Rate their overall health as good (very good or good) (85% vs 75%)
- Rate their mental health as good (very good or good) (79% vs 70%)
- Rate their dental health as good (very good or good) (75% vs 62%)
- Rate their life satisfaction as satisfied (very satisfied or satisfied) (80% vs 69%)
- Report doctor's office as their contact for primary healthcare needs (68% vs 27%)

Foreign student respondents were more likely than immigrant respondents to:

- Rate their sense of community belonging as strong (very strong or somewhat strong) (63% vs 55%)
- Rate their amount of life stress as stressed (extremely stressful, a bit stressful) (70% vs 58%)
- Report Community Health Centre ¹as their contact for primary healthcare needs (41% vs 15%)
- Report hospital outpatient clinic as their contact for primary healthcare needs (19% vs 10%)

¹ No definition of Community Health Centre was given on the survey, so respondents may have interpreted it differently.



Survey Highlights by Status in Canada

	Foreign Students (n=393)	Immigrants (n=344)	Total (n=737)
*Overall health - Good	75%	85%	79%
*Mental health - Good	70%	79%	74%
*Dental health - Good	62%	75%	68%
Impact of settlement into Canada on overall health - Less healthy now	23%	19%	21%
*Life satisfaction - Satisfied	69%	80%	74%
*Sense of community belonging - Strong	63%	55%	59%
*Life stress - Stressed	70%	58%	64%
~Source of information about healthcare services – Educational institution	27%	3%	16%
~Source of information about healthcare services - Immigration.simcoe.ca	16%	6%	11%
~Source of information about healthcare services – Newcomer services	5%	14%	9%
*Contact for primary healthcare needs – Doctor’s Office	27%	68%	55%
*Contact for primary healthcare needs – Community Health Centre	41%	15%	23%
*Contact for primary healthcare needs – Hospital Outpatient Clinic	19%	10%	13%
*Contact for primary healthcare needs – Walk-in Clinic	13%	8%	10%
Location of primary healthcare provider – Outside of Simcoe County	**	**	5%
Helpful improvement to healthcare experience – Information on how to access and navigate the healthcare system	75%	70%	73%

* Represents a statistically significant difference

** Represents data that was suppressed because the number of respondents was under 5 or to maintain confidentiality between groups

~ Of the 12 sources of information about healthcare services only the three with the most variation between groups were shared in the table

Note: No definition of Community Health Centre was given on the survey, so respondents may have interpreted it differently.



2. Length of time in Canada

Respondents were asked what year they arrived in Canada. For analysis purposes respondents were grouped into three categories; those who moved to Canada within the last 5 years; 6-10 years; and, 11+ years. Survey highlights were explored to see how immigrant respondents' responses differed by length of time in Canada to better understand the unique needs of each group. Using a Chi-square test for independence, no statistically significant differences were detected, although some variation in percentages can be seen.

Immigrant respondents who moved to Canada 11+ years ago showed a slightly lower percentage of respondents who reported their overall health as good (very good or good) (81%) compared to those who moved to Canada 6-10 years ago (89%) and within the last 5 years (87%). The percentage of immigrant respondents who rated their mental health as good (very good or good) was lowest in those who moved to Canada 6-10 years ago (73%), followed by those who moved to Canada 11+ years ago (78%), and highest in those who moved to Canada within the last 5 years (82%). The largest percentage of immigrant respondents who rated their dental health as good (very good or good) moved to Canada within the last 5 years (79%), followed by those who moved to Canada 6-10 years ago (75%), and lowest in those who moved to Canada 11+ years ago (70%).

Immigrant respondents who moved to Canada within the last 5 years showed a slightly lower percentage of respondents who reported their sense of community belonging as strong (very strong or somewhat strong) (51%) compared to those who moved to Canada 6-10 years ago (56%) and those who moved to Canada 11+ years ago (56%).

When asked about the amount of stress in their life, a larger percentage of immigrant respondents who moved to Canada within the last 5 years (62%) and 6-10 years ago (62%) reported most of their days were stressful (extremely stressful or a bit stressful) compared to those who moved to Canada 11+ years ago (55%).

A larger percentage of immigrant respondents who moved to Canada within the last 5 years reported using Newcomer Services (27%) as a source of information about healthcare services, compared to those who moved to Canada 6-10 years ago (8%) and 11+ years ago (6%).

A larger percentage of immigrant respondents who moved to Canada 11+ years ago reported going to a doctor's office for their primary healthcare needs (73%) compared to those who moved to Canada within the last 5 years (65%) and 6-10 years (65%). A larger percentage of immigrant respondents who moved to Canada within the last 5 years (21%) and 6-10 years (18%) reported going to a Community Health Centre² for primary healthcare needs compared to those who moved to Canada 11+ years ago (7%). A slightly larger percentage of immigrant respondents who had been in Canada 6-10 years reported information on how to access and navigate the healthcare system would be helpful (very helpful or somewhat helpful) (73%) compared to those who moved to Canada within the last 5 years (71%) and 11+ years (67%).

² No definition of Community Health Centre was given on the survey, so respondents may have interpreted it differently.



Survey Highlights by Length of Time in Canada for Immigrant Respondents

	Last 5 years (n=111)	6-10 years (n=69)	11+ years (n=154)	Total (n=334)
Overall health - Good	87%	89%	81%	85%
Mental health - Good	82%	73%	78%	79%
Dental health - Good	79%	75%	70%	74%
Impact of settlement into Canada on overall health - Less healthy now	19%	23%	17%	19%
Life satisfaction - Satisfied	77%	81%	80%	79%
Sense of community belonging - Strong	51%	56%	56%	54%
Life stress - Stressed	62%	62%	55%	59%
~Source of information about healthcare services– Newcomer Services	27%	8%	6%	13%
~Source of information about healthcare services - Internet search for symptoms	43%	50%	49%	47%
~Source of information about healthcare services – Immigration.simcoe.ca	10%	**	**	6%
Contact for primary healthcare needs – Doctor’s Office	65%	65%	73%	69%
Contact for primary healthcare needs – Community Health Centre	21%	18%	7%	14%
Contact for primary healthcare needs – Hospital Outpatient Clinic	**	**	9%	9%
Contact for primary healthcare needs – Walk-in Clinic	**	**	10%	8%
Location of primary healthcare provider – Outside of Simcoe County	**	**	12%	7%
Helpful improvement to healthcare experience – Information on how to access and navigate the healthcare system	71%	73%	67%	69%

** Represents data that was suppressed because the number of respondents was under 5 or to maintain confidentiality between groups

~ Of the 12 sources of information about healthcare services only the three with the most variation between groups were shared in the table

Note: No definition of Community Health Centre was given on the survey, so respondents may have interpreted it differently.



3. Gender

Respondents were given the following options to report their gender:

- Female
- Male
- Intersex
- Transgender (female to male)
- Transgender (male to female)
- Two spirit
- Other: Please specify
- Don't know
- Prefer not to answer

Female and male immigrant respondents were analyzed to understand how survey highlights differed by gender to better understand the unique needs of each group. Additional analysis was not completed for respondents who answered transgender (male to female), transgender (female to male), don't know, or prefer not to answer due to the small number of respondents who selected these responses to maintain confidentiality.

Using a Chi-square test for independence, three statistically significant differences were detected between the survey highlights and gender of immigrant respondents. These differences showed:

- Female immigrant respondents were more likely than male immigrant respondents to rate their life stress as stressful (extremely stressful or a bit stressful) (64% vs 48%).
- A larger percentage of female immigrant respondents reported going to a doctor's office for their primary healthcare needs compared male immigrant respondents (76% vs 54%) and a larger percentage of male immigrant respondents reported going to a Community Health Centre³ (24% vs 11%) or hospital outpatient clinic (15% vs 7%) for their primary healthcare needs compared female immigrant respondents.
- Female immigrant respondents were more likely than male immigrant respondents to rate information on how to access and navigate the healthcare system as a helpful (very helpful or somewhat helpful) improvement to their healthcare experience (75% vs 62%).

Additional variation between the survey highlights by gender are described below.

A larger percentage of female immigrant respondents reported using friends and family as a source of information about healthcare services compared to male immigrant respondents (47% vs 32%) and a slightly larger percentage of male immigrant respondents reported using City Hall as a source of information about healthcare services compared to females (10% vs 3%).

³ No definition of Community Health Centre was given on the survey, so respondents may have interpreted it differently.



Survey Highlights by Gender for Immigrant Respondents

	Female (n=202)	Male (n=130)	Total (n=332)
Overall health -Good	85%	84%	85%
Mental health - Good	77%	82%	79%
Dental health - Good	75%	75%	75%
Impact of settlement into Canada on overall health – Less healthy now	20%	17%	19%
Life satisfaction – Satisfied	78%	81%	79%
Sense of community belonging - Strong	54%	57%	55%
*Life Stress - Stressed	64%	48%	58%
~Source of information about healthcare services– Friends and family	47%	32%	41%
~Source of information about healthcare services - Community Health Centre	25%	31%	27%
~Source of information about healthcare services – City Hall	3%	10%	5%
*Contact for primary healthcare needs – Doctor’s Office	76%	54%	68%
*Contact for primary healthcare needs – Community Health Centre	11%	24%	15%
*Contact for primary healthcare needs – Hospital Outpatient Clinic	7%	15%	9%
*Contact for primary healthcare needs – Walk-in Clinic	7%	7%	7%
Location of primary healthcare provider – Outside of Simcoe County	8%	**	7%
*Helpful Improvement to healthcare experience – Information on how to access and navigate the healthcare system	75%	62%	70%

* Represents a statistically significant difference

** Represents data that was suppressed because the number of respondents was under 5 or to maintain confidentiality between groups

~ Of the 12 sources of information about healthcare services only the three with the most variation between groups were shared in the table

Note: No definition of Community Health Centre was given on the survey, so respondents may have interpreted it differently.



4. Income Group

When asked about total household income in 2019 before taxes from all sources, respondents were given several income categories as well as don't know and prefer not to answer options. For analysis purposes respondents were grouped into six categories:

- Under \$20,000
- \$20,000 - \$49,000
- \$50,000 - \$79,000
- \$80,000 - \$99,000
- \$100,000 and over
- Don't know or prefer not to answer

Survey highlights were explored to see how immigrant respondents' responses differed by income group to better understand the unique needs of each group. Statistical analysis was not used to determine statistical significance of differences between income groups because of the small number of respondents within each income group, although some variation in percentages can be seen.

Immigrant respondents whose household income in 2019 was under \$20,000 were:

- Less likely to rate their dental health as good (very good or good) compared to the group as a whole (68% vs 75%).
- More likely to report feeling less healthy now when asked how the process of settling into Canada affected their overall health compared to the group as a whole (28% vs 19%).
- Less likely to rate their sense of community belonging as strong (very strong or somewhat strong) compared to the group as a whole (41% vs 55%).
- More likely to rate their life stress as stressful (extremely stressful or a bit stressful) compared to the group as a whole (64% vs 58%).
- More likely to report using friends and family as a source of information about healthcare services compared to the group as a whole (54% vs 42%).
- More likely to report using Newcomer Services as a source of information about healthcare services compared to the group as a whole (25% vs 14%).
- More likely to rate information on how to access and navigate the healthcare system as a helpful (very helpful or somewhat helpful) improvement to their healthcare experience compared to the group as a whole (83% vs 70%).

Immigrant respondents whose household income in 2019 was \$20,000 - \$49,000 were:

- Less likely to rate their overall health as good (very good or good) compared to the group as a whole (75% vs 85%).
- Less likely to rate their dental health as good (very good or good) compared to the group as a whole (68% vs 75%).
- More likely to report using friends and family as a source of information about healthcare services compared to the group as a whole (50% vs 42%).
- Less likely to report using a Community Health Centre⁴ as a source of information about healthcare services compared to the group as a whole (16% vs 26%).
- More likely to have a primary healthcare provider outside of Simcoe County compared to the group as a whole (14% vs 7%).

⁴ No definition of Community Health Centre was given on the survey, so respondents may have interpreted it differently.



Immigrant respondents whose household income in 2019 was \$50,000 - \$79,000 were:

- Less likely to select 'I feel less healthy now' when asked how the process of settling into Canada affected their overall health compared to the group as a whole (12% vs 19%).
- More likely to report using a Community Health Centre⁵ as a source of information about healthcare services compared to the group as a whole (46% vs 26%).
- Less likely to report going to a doctor's office for their primary healthcare needs compared to the group as a whole (60% vs 68%).
- More likely to report going to a hospital outpatient clinic for their primary healthcare needs compared to the group as a whole (19% vs 10%).

Immigrant respondents whose household income in 2019 was \$80,000 - \$99,000 were:

- More likely to rate their dental health as good (very good or good) compared to the group as a whole (87% vs 75%).
- Less likely to report feeling less healthy now when asked how the process of settling into Canada affected their overall health compared to the group as a whole (10% vs 19%).
- More likely to rate their sense of community belonging as strong (very strong or somewhat strong) compared to the group as a whole (67% vs 55%).
- Less likely to report using friends and family as a source of information about healthcare services compared to the group as a whole (31% vs 42%).
- More likely to report using internet search for symptoms as a source of information about healthcare services compared to the group as a whole (65% vs 47%).
- More likely to report using a Community Health Centre as a source of information about healthcare services compared to the group as a whole (41% vs 26%).
- Less likely to report going to a doctor's office for their primary healthcare needs compared to the group as a whole (49% vs 68%).
- More likely to report going to Community Health Centre for their primary healthcare needs compared to the group as a whole (37% vs 15%).
- More likely to rate information on how to access and navigate the healthcare system as a helpful (very helpful or somewhat helpful) improvement to their healthcare experience compared to the group as a whole (79% vs 70%).

Immigrant respondents whose household income in 2019 was \$100,000 and over were:

- More likely to report using internet search for symptoms as a source of information about healthcare services compared to the group as a whole (55% vs 47%).
- More likely to report going to a doctor's office for their primary healthcare needs compared to the group as a whole (80% vs 68%).
- Less likely to report going to a Community Health Centre for their primary healthcare needs compared to the group as a whole (9% vs 15%).
- Less likely to rate information on how to access and navigate the healthcare system as a helpful (very helpful or somewhat helpful) improvement to their healthcare experience compared to the group as a whole (61% vs 70%).

⁵ No definition of Community Health Centre was given on the survey, so respondents may have interpreted it differently.



Immigrant respondents who reported don't know or prefer not to answer to their household income in 2019 were:

- Less likely to rate their life satisfaction as satisfied (very satisfied or satisfied) compared to the group as a whole (72% vs 80%).
- Less likely to report using internet search for symptoms as a source of information about healthcare services compared to the group as a whole (38% vs 47%).
- More likely to report going to a doctor's office for their primary healthcare needs compared to the group as a whole (79% vs 68%).
- More likely to have a primary healthcare provider outside of Simcoe County compared to the group as a whole (14% vs 7%).



Survey Highlights by Income Group for Immigrant Respondents

	Under \$20,000 (n=28)	\$20,000 - \$49,000 (n=67)	\$50,000 - \$79,000 (n=61)	\$80,000 - \$99,000 (n=55)	\$100,000 and Over (n=69)	Don't know or prefer not to answer (n=64)	Total (n=344)
Overall health - Good	82%	75%	87%	91%	84%	90%	85%
Mental health - Good	78%	74%	78%	83%	78%	81%	79%
Dental health - Good	68%	68%	72%	87%	73%	80%	75%
Impact of settlement into Canada on overall health – Less healthy now	28%	24%	12%	10%	24%	19%	19%
Life satisfaction - Satisfied	81%	80%	82%	82%	81%	72%	80%
Sense of community belonging - Strong	41%	53%	55%	67%	55%	50%	55%
Life stress - Stressed	64%	53%	60%	59%	57%	56%	58%
~Source of information about healthcare services– Friends and family	54%	50%	37%	31%	41%	43%	42%
~Source of information about healthcare services - Internet search for symptoms	42%	41%	41%	65%	55%	38%	47%
~Source of information about healthcare services – Community Health Centre	**	16%	46%	41%	23%	**	26%
~Source of information about healthcare services – Newcomer services	25%	11%	14%	14%	11%	15%	14%
Contact for primary healthcare needs – Doctor’s Office	69%	67%	60%	49%	80%	79%	68%
Contact for primary healthcare needs – Community Health Centre	**	14%		37%	9%		15%



	Under \$20,000 (n=28)	\$20,000 - \$49,000 (n=67)	\$50,000 - \$79,000 (n=61)	\$80,000 - \$99,000 (n=55)	\$100,000 and Over (n=69)	Don't know or prefer not to answer (n=64)	Total (n=344)
Contact for primary healthcare needs – Hospital Outpatient Clinic	**	**	19%	**	**	**	10%
Contact for primary healthcare needs – Walk-in Clinic	**	**	**	**	9%	**	8%
Location of primary healthcare provider – Outside of Simcoe County	**	14%	**	**	**	14%	7%
Helpful improvement to healthcare experience – Information on how to access and navigate the healthcare system	83%	71%	66%	79%	61%	66%	70%

** Represents data that was suppressed because the number of respondents was under 5 or to maintain confidentiality between groups
 ~ Of the 12 sources of information about healthcare services only the four with the most variation between groups were shared in the table
 Note: No definition of Community Health Centre was given on the survey, so respondents may have interpreted it differently.



5. Income Group by Gender

Survey highlights were explored to see how immigrant respondents' responses differed by income group and gender to better understand the unique needs of each group. Statistical analysis was not used to determine statistical significance of differences because of the small number of respondents within each group, although some variation in percentages can be seen.

Male immigrant respondents whose household income in 2019 was under \$20,000 were:

- Less likely than females to rate their overall health as good (very good or good) (63% vs 89%).
- More likely than females to rate their dental health as good (very good or good) (75% vs 68%).
- Less likely than females to rate their life satisfaction as satisfied (very satisfied or satisfied) (71% vs 83%).
- Less likely than females to rate their sense of community belonging as strong (very strong or somewhat strong) (38% vs 44%).

Male immigrant respondents whose household income in 2019 was \$20,000 - \$49,000 were:

- More likely than females to rate their overall health as good (very good or good) (79% vs 71%).
- More likely than females to rate their mental health as good (very good or good) (79% vs 70%).
- More likely than females to rate their dental health as good (very good or good) (72% vs 63%).
- Less likely than females to report feeling less healthy now when asked how the process of settling into Canada affected their overall health (20% vs 27%).
- More likely than females to rate their life satisfaction as satisfied (very satisfied or satisfied) (82% vs 76%).
- Less likely than females to rate their life stress as stressful (extremely stressful or a bit stressful) (40% vs 66%).
- Less likely than females to report using friends and family as a source of information about healthcare services (39% vs 61%).
- Less likely than females to report using internet search for symptoms as a source of information about healthcare services (33% vs 50%).
- Less likely than females to report going to a doctor's office for their primary healthcare needs (56% vs 75%).
- Less likely than females to rate information on how to access and navigate the healthcare system as a helpful (very helpful or somewhat helpful) improvement to their healthcare experience (67% vs 78%).

Male immigrant respondents whose household income in 2019 was \$50,000 - \$79,000 were:

- More likely than females to rate their mental health as good (very good or good) (85% vs 72%).
- More likely than females to rate their dental health as good (very good or good) (77% vs 69%).
- More likely than females to rate their sense of community belonging as strong (very strong or somewhat strong) (66% vs 45%).



- Less likely than females to rate their life stress as stressful (extremely stressful or a bit stressful) (41% vs 77%).
- Less likely than females to report using internet search for symptoms as a source of information about healthcare services (34% vs 47%).
- More likely than females to report using a Community Health Centre ⁶as a source of information about healthcare services (52% vs 40%).
- Less likely than females to report going to a doctor's office for their primary healthcare needs (39% vs 80%).
- Less likely than females to rate information on how to access and navigate the healthcare system as a helpful (very helpful or somewhat helpful) improvement to their healthcare experience (62% vs 70%).

Male immigrant respondents whose household income in 2019 was \$80,000 - \$99,000 were:

- More likely than females to rate their mental health as good (very good or good) (88% vs 81%).
- More likely than females to rate their sense of community belonging as strong (very strong or somewhat strong) (72% vs 64%).
- Less likely than females to report using internet search for symptoms as a source of information about healthcare services (56% vs 70%).
- More likely than females to report going to a Community Health Centre for their primary healthcare needs (64% vs 24%).

Male immigrant respondents whose household income in 2019 was \$100,000 and over were:

- More likely than females to rate their overall health as good (very good or good) (90% vs 81%).
- More likely than females to rate their mental health as good (very good or good) (83% vs 76%).
- Less likely than females to rate their life stress as stressful (extremely stressful or a bit stressful) (45% vs 67%).
- Less likely than females to report using friends and family as a source of information about healthcare services (30% vs 47%).
- More likely than females to report using a Community Health Centre as a source of information about healthcare services (30% vs 19%).
- Less likely than females to report going to a doctor's office for their primary healthcare needs (75% vs 84%).
- Less likely than females to rate information on how to access and navigate the healthcare system as a helpful (very helpful or somewhat helpful) improvement to their healthcare experience (48% vs 71%).

⁶ No definition of Community Health Centre was given on the survey, so respondents may have interpreted it differently.



Male immigrant respondents who reported don't know or prefer not to answer to their household income in 2019 were:

- Less likely than females to rate their mental health as good (very good or good) (75% vs 82%).
- Less likely than females to rate their dental health as good (very good or good) (67% vs 82%).
- More likely than females to rate their life satisfaction as satisfied (very satisfied or satisfied) (82% vs 68%).
- Less likely than females to rate their sense of community belonging as strong (very strong or somewhat strong) (40% vs 52%).
- More likely than females to report using internet search for symptoms as a source of information about healthcare services (45% vs 34%).
- More likely than females to report using a Community Health Centre⁷ as a source of information about healthcare services (27% vs 13%).
- More likely than females to report going to a doctor's office for their primary healthcare needs (100% vs 76%).
- Less likely than females to rate information on how to access and navigate the healthcare system as a helpful (very helpful or somewhat helpful) improvement to their healthcare experience (50% vs 70%).

⁷ No definition of Community Health Centre was given on the survey, so respondents may have interpreted it differently.



Survey Highlights by Income Group and Gender for Immigrant Respondents

	Under \$20,000 (n=27)	\$20,000 - \$49,000 (n=64)	\$50,000 - \$79,000 (n=61)	\$80,000 - \$99,000 (n=55)	\$100,000 and Over (n=66)	Don't know or prefer not to answer (n=59)	Total (n=332)
Male: Overall Health – Good	63%	79%	88%	88%	90%	90%	84%
Female: Overall Health - Good	89%	71%	87%	92%	81%	89%	85%
Male: Mental Health - Good	75%	79%	85%	88%	83%	75%	82%
Female: Mental Health - Good	78%	70%	72%	81%	76%	82%	77%
Male: Dental Health – Good	75%	72%	77%	83%	76%	67%	75%
Female Dental Health – Good	68%	63%	69%	89%	70%	82%	75%
Male: Impact of Settlement into Canada on Overall Health – Less healthy now	**	20%	**	**	21%	**	17%
Female: Impact of Settlement into Canada on Overall Health – Less healthy now	**	27%	**	**	25%	21%	20%
Male: Life Satisfaction - Good	71%	82%	83%	83%	79%	82%	81%
Female: Life Satisfaction - Good	83%	76%	81%	81%	84%	68%	78%
Male: Sense of Community Belonging - Strong	38%	53%	66%	72%	55%	40%	57%
Female: Sense of Community Belonging - Strong	44%	55%	45%	64%	60%	52%	54%
Male: Life Stress - Stressed	63%	40%	41%	61%	45%	60%	48%
Female: Life Stress - Stressed	63%	66%	77%	57%	67%	57%	64%
~Male: Source of information about healthcare services– Friends and family	**	39%	38%	28%	30%	**	32%



	Under \$20,000 (n=27)	\$20,000 - \$49,000 (n=64)	\$50,000 - \$79,000 (n=61)	\$80,000 - \$99,000 (n=55)	\$100,000 and Over (n=66)	Don't know or prefer not to answer (n=59)	Total (n=332)
~Female: Source of information about healthcare services– Friends and family	65%	61%	37%	33%	47%	47%	47%
~Male: Source of information about healthcare services - Internet search for symptoms	**	33%	34%	56%	56%	45%	43%
~Female: Source of information about healthcare services - Internet search for symptoms	47%	50%	47%	70%	53%	34%	49%
~Male: Source of information about healthcare services – Community Health Centre	**	**	52%	44%	30%	27%	31%
~Female: Source of information about healthcare services – Community Health Centre	**	21%	40%	39%	19%	13%	25%
Male: Contact for primary healthcare needs – Doctor's Office	**	56%	39%	**	75%	100%	54%
Female: Contact for primary healthcare needs – Doctor's Office	77%	75%	80%	62%	84%	76%	76%
Male: Contact for primary healthcare needs – Community Health Centre	**	**	**	64%	**	**	24%
Female: Contact for primary healthcare needs – Community Health Centre	**	**	**	24%	**	**	11%



	Under \$20,000 (n=27)	\$20,000 - \$49,000 (n=64)	\$50,000 - \$79,000 (n=61)	\$80,000 - \$99,000 (n=55)	\$100,000 and Over (n=66)	Don't know or prefer not to answer (n=59)	Total (n=332)
Male: Contact for primary healthcare needs – Hospital Outpatient Clinic	**	**	30%	**	**	**	15%
Female: Contact for primary healthcare needs – Hospital Outpatient Clinic	**	**	**	**	**	**	6%
Male: Contact for primary healthcare needs – Walk-in Clinic	**	**	**	**	**	**	7%
Female: Contact for primary healthcare needs – Walk-in Clinic	**	**	**	**	**	**	7%
Male: Location of Primary Healthcare Provider – Outside of Simcoe County	**	**	**	**	**	**	**
Female: Location of Primary Healthcare Provider – Outside of Simcoe County	**	**	**	**	**	**	8%
Male: Helpful Improvement to healthcare experience – Information on how to access and navigate the healthcare system	**	67%	62%	83%	48%	50%	62%
Female: Helpful Improvement to healthcare experience – Information on how to access and navigate the healthcare system	94%	78%	70%	77%	71%	70%	75%

** Represents data that was suppressed because the number of respondents was under 5 or to maintain confidentiality between groups
 ~ Of the 12 sources of information about healthcare services only the three with the most variation between groups were shared in the table
 Note: No definition of Community Health Centre was given on the survey, so respondents may have interpreted it differently.



6. Visible Minority Group

Respondents were asked ‘do you consider yourself a member of a visible minority group?’ and given the following options:

- Yes
 - South Asian (e.g., East Indian, Pakistani, Sri Lankan, etc.)
 - Chinese
 - Black
 - Filipino
 - Latin American
 - Arab
 - Southeast Asian (e.g., Vietnamese, Cambodian, Laotian, Thai, etc.)
 - West Asian (e.g., Iranian, Afghan, etc.)
 - Korean
 - Japanese
 - Mixed Ethnicity
 - No (Caucasian)
 - Other: Please specify
 - Don't know
 - Prefer not to answer

For analysis purposes respondents were grouped into two categories, visible minority and not a visible minority (Caucasian). Additional analysis was not completed for respondents who answered mixed ethnicity, other, don't know or prefer not to answer due to the small number of respondents who selected these responses to maintain confidentiality.

Using a Chi-square test for independence, one statistically significant difference was detected between the survey highlights and visible minority group of immigrant respondents. This difference showed:

- Immigrant respondents who identified as a visible minority were less likely than those who identified as Caucasian to report going to a doctor's office for their primary healthcare needs (60% vs 78%)

Additional variation between the survey highlights and those who identified as a visible minority are described below.

Immigrant respondents who identified as a visible minority were:

- More likely than Caucasian respondents to rate their mental health as good (very good or good) (83% vs 74%).
- More likely than Caucasian respondents to rate their dental health as good (very good or good) (79% vs 69%).
- Less likely than Caucasian respondents to report feeling less healthy now, when asked how the process of settling into Canada affected their overall health (16% vs 26%).
- More likely than Caucasian respondents to rate their sense of community belonging as strong (very strong or somewhat strong) (57% vs 50%).
- More likely than Caucasian respondents to report using a Community Health Centre⁸ as a source of information about healthcare services (31% vs 23%).
- More likely than Caucasian respondents to rate information on how to access and navigate the healthcare system as a helpful (very helpful or somewhat helpful) improvement to their healthcare experience (76% vs 61%).

⁸ No definition of Community Health Centre was given on the survey, so respondents may have interpreted it differently.



Survey Highlights by Visible Minority Group for Immigrant Respondents

	Visible Minority (n=217)	Not a Visible Minority (Caucasian) (n=81)	Total (n=298)
Overall health -Good	87%	81%	85%
Mental health - Good	83%	74%	80%
Dental health - Good	79%	69%	76%
Impact of settlement into Canada on overall health – Less healthy now	16%	26%	19%
Life satisfaction – Satisfied	81%	81%	81%
Sense of community belonging - Strong	57%	50%	55%
Life Stress - Stressed	56%	59%	57%
~Source of information about healthcare services–Newcomer services	**	**	14%
~Source of information about healthcare services - Community Health Centre	31%	23%	29%
~Source of information about healthcare services – City Hall	**	**	6%
*Contact for primary healthcare needs – Doctor’s Office	60%	78%	65%
*Contact for primary healthcare needs – Community Health Centre	**	**	16%
*Contact for primary healthcare needs – Hospital Outpatient Clinic	10%	9%	10%
*Contact for primary healthcare needs – Walk-in Clinic	9%	8%	8%
Location of primary healthcare provider – Outside of Simcoe County	**	**	7%
Helpful Improvement to healthcare experience – Information on how to access and navigate the healthcare system	76%	61%	72%

* Represents a statistically significant difference

** Represents data that was suppressed because the number of respondents was under 5 or to maintain confidentiality between groups

~ Of the 12 sources of information about healthcare services only the three with the most variation between groups were shared in the table

Note: No definition of Community Health Centre was given on the survey, so respondents may have interpreted it differently.



7. Where Respondents Lived

Only respondents who reported they currently lived in Simcoe County were included in the survey. Based on reported local municipality, immigrant respondents were grouped into five categories. These categories included Barrie, North Simcoe (Midland, Penetanguishene, Tay, and Tiny), Orillia and Area (Orillia, Oro-Medonte, Ramara, and Severn), South Georgian Bay (Clearview, Collingwood, Springwater, and Wasaga Beach) and South Simcoe (Adjala-Tosorontio, Bradford West Gwillimbury, Essa, Innisfil, and New Tecumseth).

Using a Chi-square test for independence, one statistically significant difference was detected between the survey highlights and where immigrant respondents lived. This difference showed:

- The largest percentage of immigrant respondents who reported most of their days were stressful (extremely stressful or a bit stressful), lived in Barrie (68%), followed by South Simcoe (59%), North Simcoe (54%), South Georgian Bay (47%), and Orillia and Area (41%).

Additional variation between the survey highlights and where respondents lived are described below.

Immigrant respondents who lived in Barrie were:

- More likely to report going to a doctor's office for their primary healthcare needs compared to the group as a whole (78% vs 68%)

Immigrant respondents who lived in North Simcoe were:

- Less likely to report using friends and family as a source of information about healthcare services compared to the group as a whole (33% vs 42%).
- More likely to report using a Community Health Centre⁹ as a source of information about healthcare services compared to the group as a whole (43% vs 26%).
- Less likely to report going to a doctor's office for their primary healthcare needs compared to the group as a whole (46% vs 68%).
- More likely to report going to a Community Health Centre for their primary healthcare needs compared to the group as a whole (36% vs 15%).
- Less likely to rate information on how to access and navigate the healthcare system as a helpful (very helpful or somewhat helpful) improvement to their healthcare experience compared to the group as a whole (64% vs 70%).

Immigrant respondents who lived in Orillia and Area were:

- More likely to report their dental health as good (very good or good) compared to the group as a whole (84% vs 75%).
- More likely to report their life satisfaction as (very satisfied or satisfied) compared to the group as a whole (91% vs 80%).
- More likely to rate their sense of community belonging as strong (very strong or somewhat strong) compared to the group as a whole (68% vs 55%).
- More likely to report using friends and family as a source of information about healthcare services compared to the group as a whole (52% vs 42%).
- More likely to report using a Community Health Centre as a source of information about healthcare services compared to the group as a whole (45% vs 26%).

⁹ No definition of Community Health Centre was given on the survey, so respondents may have interpreted it differently.



- Less likely to report going to a doctor's office for their primary healthcare needs compared to the group as a whole (55% vs 68%).
- More likely to report going to a Community Health Centre¹⁰ for their primary healthcare needs compared to the group as a whole (23% vs 15%).
- More likely to report going to a hospital outpatient clinic for their primary healthcare needs compared to the group as a whole (23% vs 10%).

Immigrant respondents who lived in South Georgian Bay were:

- Less likely to report feeling less healthy now, when asked how the process of settling into Canada affected their overall health compared to the group as a whole (11% vs 19%).
- More likely to report their life satisfaction as satisfied (very satisfied or satisfied) compared to the group as a whole (90% vs 80%).
- Less likely to rate their sense of community belonging as strong (very strong or somewhat strong) compared to the group as a whole (45% vs 55%).
- Less likely to report using friends and family as a source of information about healthcare services compared to the group as a whole (32% vs 42%).

Immigrant respondents who lived in South Simcoe were:

- Less likely to report using a Community Health Centre as a source of information about healthcare services compared to the group as a whole (18% vs 26%).
- More likely to have a primary healthcare provider outside of Simcoe County compared to the group as a whole (14% vs 7%).

¹⁰ No definition of Community Health Centre was given on the survey, so respondents may have interpreted it differently.



Survey Highlights by Where Respondents Lived for Immigrant Respondents

	Barrie (n=105)	North Simcoe (n=44)	Orillia and Area (n=35)	South Georgian Bay (n=40)	South Simcoe (n=120)	Total (n=344)
Overall health - Good	82%	88%	88%	82%	86%	85%
Mental health - Good	76%	81%	75%	83%	80%	79%
Dental health - Good	72%	79%	84%	75%	73%	75%
Impact of settlement into Canada on overall health – Less healthy now	20%	16%	**	**	25%	19%
Life satisfaction - Satisfied	75%	84%	91%	90%	75%	80%
Sense of community belonging - Strong	56%	57%	68%	45%	51%	55%
*Life stress - Stressed	68%	54%	41%	47%	59%	58%
~Source of information about healthcare services– Friends and family	47%	33%	52%	32%	41%	42%
~Source of information about healthcare services – Community Health Centre	24%	43%	45%	21%	18%	26%
~Source of information about healthcare services – Newcomer services	10%	12%	15%	13%	17%	14%
Contact for primary healthcare needs – Doctor’s Office	78%	46%	55%	74%	66%	68%
Contact for primary healthcare needs – Community Health Centre	**	36%	23%	**	15%	15%
Contact for primary healthcare needs – Hospital Outpatient Clinic	**	**	23%	**	8%	10%
Contact for primary healthcare needs – Walk-in Clinic	11%	**	**	**	11%	8%
Location of primary healthcare provider – Outside of Simcoe County	**	**	**	**	14%	7%
Helpful improvement to healthcare experience – Information on how to access and navigate the healthcare system	70%	64%	73%	70%	71%	70%

* Represents a statistically significant difference

** Represents data that was suppressed because the number of respondents was under 5 or to maintain confidentiality between groups

~ Of the 12 sources of information about healthcare services only the three with the most variation between groups were shared in the table

Note: No definition of Community Health Centre was given on the survey, so respondents may have interpreted it differently.