Voices of Multicultural Youth: Impact of urban neighbourhood on health and well-being

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St. James Town Initiative

Wellesley Institute

advancing urban health

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- identify and advance practical and achievable policy alternatives and solutions to pressing issues of urban health;

- fund research on the social determinants of health and health disparities, focusing on the relationships between health and housing, poverty and income distribution, social exclusion and other social and economic inequalities;

- support community engagement and capacity building;

- work in numerous collaborations and partnerships locally, nationally and internationally, to support social and policy change to address the impact of the social determinants of health.

Our organization is a unique hybrid: while there are many policy institutes and think tanks, many organizations providing capacity building, and some funding of community-based research, no other institute in Canada brings all these strands together, all focused on developing research and community-based policy solutions to problems of urban health.

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Executive Summary

Youth of today are the leaders of tomorrow. Their healthy growth and development is a collective interest of our society. One third of the 242,000 newcomers coming each year to Canada are youth. As of 2006, 9 percent of Canadian youth under 25 were immigrants, and this number is expected to increase dramatically within the next decade as more immigrants arrive in Canada.

Young immigrants face very different challenges from those faced by their parents and by other Canadian youth. Their challenges are related to adapting to a new country with an entirely different culture, often with the added weight of poverty. Most research on youth health to date has focussed on biomedical and individual behavioural factors. However, these studies lack deeper understanding of how youth's life situations facilitate or act as barriers to practice behaviours directed towards healthy lifestyles. This study is based on the social determinants of health approach which recognizes that both individual and structural factors affect individual health and wellbeing.

This study was carried out in the neighbourhood of St. James Town (SJT), an urban multicultural neighbourhood located in Toronto's downtown core. We used Photovoice to explore how multicultural youth in St. James Town perceive their neighbourhood to play a role in their health and well-being. Twenty-one youth from diverse ethno-racial and cultural background volunteered to participate in this study. Through this process we collected 59 photo-stories depicting their lived experiences in the neighbourhood.

The results explored through the photographs and stories show the multitude of neighbourhood factors experienced at the community level. The youth's photo-stories revolve around the physical and social factors that inhibit and promote neighbourhood health. Most youth believe that SJT neighbourhood has some wonderful attributes and a great deal of potential; however these assets are often undermined by the neighbourhood's negative qualities, many of which are considered avoidable.

The two neighbourhood places most widely valued by the youth were parks and recreational facilities. These are public spaces: they are outside of the home, they are low to no cost, and they host a broad range of activities. Among the activities that are most valued in these spaces is socializing. Everyday public spaces facilitate social interactions which can provide relief from daily stresses, enhance social networks and bonding, and improve mood.

The youth also perceive parks and recreational facilities to play a positive role in their physical activity and fitness. They discuss exercise and sports as a large part of their recreational activities with friends, and they consistently praise parks, churches, the community centre and the school for their ability to contribute to their active lifestyles.

Many youth voiced safety as a major concern in this neighbourhood. The evenings in this neighbourhood can be dangerous as a consequence of gangs, violence, and drugs. As one youth describes, "going out at night is a kind of suicide." Fear of walking through a neighbourhood's parks after dark can constrict a person's choices and autonomy; therefore safety issues can be damaging to health and well-being of youth who particularly value and enjoy freedom.

Park maintenance and garbage build up also influence the accessibility of public neighbourhood spaces. The youth's accounts of public spaces in St. James Town add to existing evidence that parks in urban immigrant neighbourhoods are poorly maintained. The lack of maintenance has resulted in unsafe conditions such that using the park could be hazardous to a person's health.

The impact of environmental quality in urban settings on health and well-being may be understood and resolved when local knowledge about the full range of physical, social and economic conditions is appreciated by planners, policy makers, and practitioners. The majority of the issues and assets emphasized in this study are not traditionally considered to be within the realm of the health sector. Therefore, a social determinants approach that considers the impact of neighbourhood conditions is required to improve health equity.

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Introduction

The youth of today are the leaders of tomorrow. Their healthy growth and development is a collective interest of our society. In Canada, as with other developed countries, sustained low levels of fertility below the replacement level and declining mortality rates have resulted in a decline in newborn Canadians and an increasingly aging Canadian population. However, owing to an active immigration policy, Canada's population continues to grow. As a cultural mosaic, Canada welcomes an average of 242,000 newcomers from all over the world (Statistics Canada, 2008a). In 2006, immigration accounted for roughly two-thirds of Canada's population growth, and by 2030, immigration is projected to be the only source of growth for the Canadian population (Statistics Canada, 2008b). Youth form one-third of the immigrants coming to Canada each year (Kunz & Hanvey, 2000), and as of 2006, 894,965 (9%) of Canadian youth under 25 were immigrants, and this number is expected to increase dramatically within the next decade as more immigrants arrive in Canada (Statistics Canada, 2009b).

Of all newcomers to Canada, seven of ten choose to settle in three of Canada's largest metropolitan cities: Toronto, Vancouver, and Montreal. The Toronto census metropolitan area alone accounts for over 40 percent of all recent immigrants to Canada (Statistics Canada, 2009a), and as a result, Toronto's demographic growth is greater than that of the country as a whole (Statistics Canada, 2009c). Recent immigrants tend to have poorer economic circumstances than other Canadians, and therefore settle in neighbourhoods with high rates of poverty (Kazemipur & Halli, 2000). These neighbourhoods tend to be older, in poorer condition, and in need of repair (Carter, 2005). Given the young demographic structure of recent immigrants to Canada, it appears that a large proportion of young immigrants are settling in low income urban neighbourhoods.

These rapidly changing demographics beg the question: are we taking care of young immigrants to our country? Increasingly, it is acknowledged that young immigrants face very different challenges from those faced by their parents and by other Canadian youth. In addition to challenges associated with being a youth in Canada, young immigrants face challenges related to adapting to a new country with an entirely different culture, often with the added weight of poverty. When these difficulties go unaddressed, they pose the risk of undermining the well-being of the youth; therefore, there is a need to learn about and attend to the unique needs and circumstances of immigrant youth.

Overview of Immigrant Youth Health

For the purpose of reducing public health risk and excessive burden to the health care system, immigrants to Canada must meet specific health requirements. This screening process leads to what has been termed by many researchers as the healthy immigrant effect whereby immigrants come to Canada with a health advantage; however this health advantage declines towards Canadian born levels in as little as two years after their arrival (Chen, Ng, & Wilkins, 1996; Chen, Wilkins, & Ng, 1996; Ng, Wilkins, Gendron, & Berthelot,

2005). Recent immigrant youth share the same healthy immigrant effect as the adult population, and there is some indication that as their length of residency in Canada increases, their health behaviours become more risky (Kunz & Hanvey, 2000).

Much of the research available on immigrant health focuses on adults or on immigrant population as a whole, resulting in limited data regarding the unique health circumstances of immigrant youth. Of existing research on immigrant youth, a complex reality is revealed. Some studies indicate that the average immigrant youth tends to fare better in both health and scholastic achievement than their native-born counterparts (Beiser, Hou, Hyman, & Tousignant, 1998) while others report that youth face multiple challenges in the initial resettlement years. Among immigrant youth, language barriers and intergenerational and gender differences, coupled with the developmental transitions associated with the adolescent years can pose challenges for newcomer youth in Canada (Khanlou, et al., 2002). Similarly, the Family Service Association of Toronto, an organization that works directly and extensively with immigrant families settling in Canada, argues that the settlement, adaptation, and integration process is challenging for youth and warrants attention (Seat, 2000).

The extensive bio-medical research on youth health focusses on behaviours that put youth and their health at risk, such as drug and alcohol use, tobacco smoking, unsafe sexual behaviours (Simoes, Batista-Foguet, Matos, & Calmeiro, 2008; Sjöberg, Holm, Ullén, & Brandberg, 2004). However, these studies lack deeper understanding of how youth's life situations facilitate or act as barriers to practice behaviours directed towards healthy lifestyles. To gain deeper understanding of youth's health and well-being issues, research involving qualitative techniques that can provide knowledge about the daily life experiences of youth is needed.

The World Health Organization (1948) defines health as "the state of complete physical, mental and social well-being and not merely the absence of disease or infirmity" (World Health Organization, 1948). These components of health: physical, social, and mental well-being, intersect and influence one another to produce overall health. A person's health is now widely understood to be largely determined by their living circumstances such as their access to health care, education, conditions of work and leisure, housing, communities, and neighbourhoods (CSDH, 2008). Social Determinants of Health (SDOH) such as language proficiency,

cultural differences, employment, and socioeconomic status have been recognized as contributing to the health decline of immigrants (Health Canada, 2010). Some argue that SDOH also refers to the quantity and quality of resources that a society makes available to its population (Raphael, 2007).

A number of SDOH variables play a role in immigrant youth health and well-being. These are determinants of health for both youth and immigrants; however there is still a great need for more research regarding their impact on the immigrant youth population.

Geographic location has been distinguished as one of the leading factors associated with health disparities in Canada (Health Disparities Task Group, 2004). The neighbourhood in which we live can have a profound effect on our health outcomes. Neighbourhood-level factors influencing health such as the built environment, housing conditions, socioeconomic status, and neighbourhood safety and cohesion have all been identified to play a role in our health and well-being (Baum, Ziersch, Zhang, & Osborne, 2009; Haque & Eng, 2011; Heslop, Miller, & Hill, 2009) and are receiving increasing attention from researchers and policymakers. The Canadian Institute for Health Information's (2006) detailed report on health in urban neighbourhoods contends that more research on the nature of neighbourhood-resident interactions is imperative.

A systematic review has found that built environments are a foundation of health and wellness for individuals and communities. Linking built environment to health issues such as physical activity, obesity, social capital and mental health, the review asserts that paying attention to the way neighbourhoods are constructed can have a strong impact on physical and mental well-being (Renalds, Smith, & Hale, 2010). Neighbourhood walkability is associated with more physical activity and lower weight and obesity; areas that support physical activity tend to report better social capital, lower rates of depression and less alcohol abuse; and general attractiveness and perceptions of safety are associated with greater overall physical health. The built environment varies across neighbourhoods, resulting in an inequitable distribution of resources and conditions; therefore built environment is a health equity issue.

Neighbourhood socioeconomic status is inextricably related with minority and immigrant status. Evidence shows that visible minority immigrants are overrepresented in neighbourhoods with high poverty rates in Canada (Kazemipur & Halli, 2000). Poverty has firmly been established to have unfavourable effects on youth depression and obesity (Goodman, Slap, & Huang, 2002)

as well as non-cardiovascular chronic disease mortality such as cancer (Heslop, et al., 2009). Immigrant youth in neighbourhoods with higher poverty rates are more likely to be exposed to family stressors such as under- and unemployment, inadequate income, strain on familial relationships, parental depression, and increased potential for family dysfunction (Ahmed, 2005). Worse still, the pervasive stress of urban poverty has been shown to impede the ability for youth to cope with problems (Tolan & Grant, 2009). Among recent immigrants to Canada, 42 percent live in crowded housing with poor conditions and spend 30 percent or more of their income on rent (Carter, 2005). These relentless challenges can have detrimental consequences on health and well-being. Indeed, socioeconomic status is documented to be an important determinant of health for youth, accounting for a large proportion of the disease burden (Goodman, et al., 2002).

Neighbourhoods with a high concentration of minorities are likely to face disadvantages associated with low neighbourhood cohesion. A study of youth in racially mixed neighbourhoods found that visible minority Canadian youth living in neighbourhoods with a high concentration of minorities tend to have poorer health and higher levels of depression than those in predominantly white neighbourhoods (Abada, Hou, & Ram, 2007). The authors suggest that inner-city neighbourhoods, in which poor and minority people are concentrated, have low residential stability and ethnic homogeneity. This is because new immigrants choose low-cost housing upon arrival in Canada and then move to higher quality neighbourhoods as they secure better jobs (Carter, 2005). This can compromise social cohesion within the community which in turn has a negative impact on youth health and well-being. One meta-analysis confirms that mixed racial neighbourhoods had smaller social networks and youth living in these neighbourhoods reported perceiving limited opportunities for their future (Kingston, Huizinga, & S., 2009). This corroborates other research indicating neighbourhood cohesion is closely linked to self-reported physical and mental health (Ellaway, Macintyre, & Kearns, 2001), it strengthens willingness to intervene on behalf of others (Sampson, Raudenbush, & Earls, 1997), and among youth, social cohesion may be effective for reducing youth violence (Widome, Sieving, Harpin, & Hearst, 2008). Interestingly, homogenous racial minority neighbourhoods are known to be a positive influence on the health and well-being of minority immigrants (Pickett & Wilkinson, 2008). Therefore health and well-being among multicultural youth appears to be negatively influenced by their stay in poor and racially mixed neighbourhoods where social cohesion is undermined.

Neighbourhoods with high poverty and visible minority representation are prone to a number of psychological and physical barriers to youth health and well-being. In neighbourhoods where low income visible minorities are overrepresented, housing is generally comprised of rental properties in older buildings in poorer condition. An analysis of data from the National Longitudinal Survey of Children and Youth has revealed that neighbourhood characteristics such as home ownership, the need for major home repairs, and residential stability affect the well-being of Canadian young children, often differently between genders (Gagné & Ferrer, 2006). Home ownership is beneficial to girls and increased length of stay in one neighbourhood is beneficial to boys. Maintenance of the housing property is important to both genders and is often predicted by home ownership. Children from neighbourhoods scoring low on these categories are more likely to develop cognitive, behavioural, and emotional difficulties such as lower math and reading scores and more emotional and behavioural disorders. Older adolescents, however, are not negatively affected by low housing tenure, and this is suspected to be because they are more independent and preoccupied with matters outside of the home (Cairney, 2005). This may suggest neighbourhood factors outside of the home may be more influential to older adolescents' health and well-being.

Outside of the home in low income inner-city neighbourhoods where there is a high representation of visible minorities, there are a number of difficulties associated with the built environment. Public spaces are important to the socialization of youth from different cultures (Seeland, Sabine, & Hansmann, 2009) and are associated with increased physical activity (Addy, et al., 2004). Yet research suggests that low-income neighbourhoods, which are dominated by visible minorities, tend to have fewer accessible and poorer quality spaces such as parks and community centres (Coen & Ross, 2006; Haque & Eng, 2011; Wolch, 2005). As well, since residing in disadvantaged neighbourhoods reduces social cohesion and increases safety concerns about going outside, living in a poor neighbourhood is associated with low participation in recreational programs (Cradock, Kawachi, Colditz, Gortmaker, & Buka, 2009) and increased BMI percentiles (Oliver & Hayes, 2008). It is further argued that public spaces are especially important to economically vulnerable neighbourhoods since residents with low income are less likely to have access to private recreation spaces, lack other recrea-

tional outlets, and are socially distressed (Gilliland, Holmes, Irwin, & Tucker, 2006). Among an age group where socialization with peers is highly valued (CIHI, 2006) and physical activity is particularly effective at maintaining health, living in a disadvantaged neighbourhood where physical characteristics deter outdoor activities can be harmful to youth development and well-being.

Immigrant youth are also subject to struggles surrounding cultural adaptation. Competition from dual cultures is stressful and the experience of migration is laden with changes in numerous domains of immigrant youth's lives. In addition to learning a new language, immigrant youth must adapt to a new culture. For example, South Asian youth interviewed about their dual cultures expressed discomfort with tensions between two competing value systems, expectations and stereotypes, repeatedly struggling with choices about their clothing, behaviours, and their religion (Desai & Subramanian, 2000). Muslim females, whose parental cultural expectations of them are often strict and very different from the more liberal Canadian cultural expectations, experience a great deal of turbulence when trying to adapt to and develop a personal identity in their new host culture (Zine, 2008). This confusion and vulnerability is compounded when there are few adults available who are in a position to relate and guide youth through their experiences (Friedman, 1993). Migrating to a new country breaks down the socialization process of youth, as norms and rules for behaviour within original countries are challenged by those from their host country. The newcomer youths' relationship with their parents change, and their parents can be too preoccupied with their own struggles to provide appropriate guidance (Seat, 2000).

Youth have consistently received a lot of attention from researchers in the past, and they are recognized for their impending transition into adulthood and eventual contribution to the labour force. Adolescence is a stage of life commonly characterized by exploration, both of the self and of one's surroundings (Schmitt-Rodermund & Vondracek, 1999; Vo-Jutabha, Dinh, McHale, & Valsiner, 2009). As youth gain autonomy and increase their interaction with social and physical environments, they learn about who they are and how the world functions around them (Erikson, 1968). The transition from childhood to adulthood is both dynamic and fragile, as it is marked by changes in the body, mind, and social relationships, which can be difficult to manage (Friedman, 1993).

Despite overwhelming statistics demonstrating the prevalence and importance of immigrant youth in Canada, research on this subset is limited. With ever-increasing globalization and Canada's population trends, the need for research on the experiences of immigrant adolescence is growing. Recent work has begun to unravel the unique needs of immigrant youth, however more is needed.

In this study we explore how Canadian multicultural youth in urban neighbourhood perceive health and well-being within the context of the neighbourhood they live in. We look through the lens of youth to develop a greater understanding of how neighbourhood influences their health.

This Project

STUDY CONTEXT

Our study takes place in St. James Town (SJT), a neighbourhood of downtown Toronto, Canada. SJT is a highly multicultural neighbourhood and is established as an immigrant receiving area with about 64 percent of its residents being immigrants and 26 percent having arrived in Canada within the last five years. The neighbourhood boasts immigrant-residents from a large number of ethno-racial communities, including Filipino, Chinese, Indian, Sri Lankan, Pakistani, Korean, Bangladeshi, Indian, Nepali, Ethiopian, Somali and Eastern European communities (Statistics Canada, 2001), SJT is also a "vertical community," composed of 18 aging high-rise rental apartment buildings which house approximately 14,666 people (resident estimates are higher at 20-25,000) in the community's 0.23 km2 of land. At 64,636 people per km2, as compared with Toronto (CMA)'s population density of 866 people per km2, SJT is one of the most highly diverse and densely populated neighbourhoods in Canada (Statsitics Canada, 2006).

St. James Town possesses many of the neighbourhood characteristics known as risk factors to resident health and well-being. Despite having the same levels of education as the rest of Toronto, 50 percent of private households in St. James Town fall below Statistics Canada's low income cut-off compared with just 18 percent in all of Toronto (Statsitics Canada, 2006). The neighbourhood's buildings and parks are poorly maintained, with housing structures requiring (but not receiving) major repairs, garbage is improperly managed, and parks have been vandalized and poorly maintained (Haque & Eng, 2011). SJT also has a number of positive traits, such as being walking distance

to the city's downtown core, having highly accessible public transportation, and has schools, stores, and community services within the neighbourhood. These factors may pose unique challenges and opportunities for the youth in the neighbourhood, and understanding the intersection between multicultural youths' health and neighbourhood influences in SJT will shed light on neighbourhood influences on multicultural youths' health in other Canadian receiving neighbourhoods.

COMMUNITY BASED PARTICIPATORY RESEARCH

Community-based participatory research (CBPR), which incorporates people's lived experiences, is crucial for fully comprehending any neighbourhood's impact on health (Bryant, Raphael, & Travers, 2007). The ultimate goal of CBPR is to develop meaningful, responsive research to advocate for policies and interventions to improve health and well-being. With the inclusion of community members 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 and outcomes (Israel, Schulz, Parker, & Becker, 1998). CBPR 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). 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.

PHOTOVOICE

Photovoice is an arts-based CBPR method where voices are captured and shared through photography and storytelling. Using this technique, people can identify, represent and convey specific issues of their community (Wang, Cash, & Powers, 2000). This technique creates an opportunity to raise collective awareness of issues and challenges that they have experienced. It is a mutually beneficial approach as it can be used to increase researcher knowledge about people's perceptions and behaviours while creating a foundation for social change at the community level (Wang, Morrel-Samuels, Hutchison, Bell, & Pestronk, 2004). By building the capacity of participants and by valuing their knowledge and experiences, Photovoice can be used to advocate for change by promoting a critical dia-

logue 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 been involved in the process (Wang, 1999). The process is a credible and effective way for marginalized individuals and groups to "become advocates in their own lives and communities" (Wang & Redwood-Jones, 2001).

Photovoice has been used successfully with multicultural youth throughout the world, including Toronto. One notable example of Photovoice used with youth in Toronto is the Global Youth Voices project taking place in Regent Park, a neighbourhood within close proximity to St. James Town. This project explored youths' perceptions of how masculinity is portrayed in popular culture and the roots of violence among boys. Using the results of this project, the Photovoice participants have teamed up with other youth to create a multimedia presentation which continues to be used as a tool for stimulating discussion and awareness about violence. Photovoice is an excellent methodology for engaging youth, who are notoriously difficult to engage. Its appeal among youth comes from its ability to harness the desire of young people to express themselves and be autonomous (Wang, 2006).

Using Photovoice with youth raises special ethical considerations. Youth have a tendency to downplay risks or adverse consequences of incriminating photos (Wang, 2006), therefore extra precautions must be made to ensure youth participants understand the ethics of taking pictures and the consequences that could ensue from inappropriate photographs. Additionally, project facilitators must emphasize that the youth's immediate safety is the highest priority and that no picture should be taken if it jeopardises a person's safety.

OBJECTIVES

There were six goals of this project, falling under two categories: research and community development.

The research objectives of the project are:

(i) To understand youth perceptions of neighbourhood and its implication on health and well-being;

(ii) To explore whether gender differences exist in youth perceptions;

(iii) To compare the results with SJT adult photovoice project for similarities and differences;

The community development goals of the project are:

(iv) To engage multicultural youth in meaningful way;

(v) To contribute towards youth leadership and skills development;

(vi) To help youth understand health from human rights point of view and how social aspects of life contribute to good health and well-being

TIMELINE

The field work for this project took place over a five week period during the summer break of 2009. An introductory workshop with the participants was held, after which the participants were given two weeks to complete their photo assignment. Once the photographs were developed, hardcopies were shown to their respective participants and they were asked to select three photographs that they felt best represented their perceptions of health in St. James Town. Upon viewing their photographs, participants were given the writing portion of the project and asked to submit stories in another two weeks. The final workshop followed immediately after the stories were submitted. The following summer, three interns who had participated in the Photovoice project returned for eight weeks to work with the researchers to organize a community exposition of the group's work to disseminate results.

INTERNS

Three interns, who were also participants of the photovoice project, were hired by the Initiative over two summers to take an active role in the research and dissemination process. One of the goals of the internship was to contribute towards developing the three youths' leadership and other work and research skills. They were therefore given additional responsibility for taking lead role in many of the planning and implementation processes of the youth photovoice project. Efforts were made to broaden their understanding of health, the relationships between health and social determinants of health, and health as an human right issues. Responsibilities intended to help develop leadership included providing opportunities for public speaking and presentations. For example they were engaged to speak about the St. James Town neighbourhood and to give a guided tour to a group of international particpants attending a Mental Health Pre-Conference meeting organized at the Wellesley Institute.

The interns were engaged in managing the youth photovoice participants through organizing workshops, collecting and developing photos and following up with participants. To develop public speaking skills, the interns delivered presentations and created short informative films about their neighbourhood. To build self efficacy, the interns completed exercises to learn about research methods and plotting and interpreting graphs. To foster leadership and project planning skills the interns organized and hosted a community exposition to disseminate the research findings the following year. The event was widely attended by community members, program managers, service providers, researchers and program planners. Throughout these internships we emphasized the value of their viewpoints and encouraged them to take initiaitive. We also encouraged autonomy so that interns could use their own creativity and ideas to accomplish their goals.

Methods

DESIGN

A mix of purposive and snowball sampling techniques were used to obtain a sample of participants who are equal in gender ratio, diverse in ethno-racial background, and who are residents of St. James Town. Participants were recruited through the networks of three summer interns working on the project. The three summer interns were recruited from the applications received from the community. The selection criteria included educational merit, age (18-24 years), residency in the neighbourhood, interest in the project, and their wide social network (e.g. active membership in games like basketball, volunteer and social groups) in the community.

One of the objectives was to compare the youth photovoice findings with the adult photovoice findings; therefore we standardized the two studies (adult and youth photovoice) by using the same training materials as the adult photovoice project. The interns were not given access to the research materials and reports from the adult photovoice project that could have potentially influenced their own feelings and ideas. Additionally, interns' photo stories were submitted earlier than other participants' so that their stories were not informed or influenced from reading photo-stories from other participants of the youth project.

PARTICIPANTS

A total of 21 multicultural youth residents participated in the Youth Photovoice project. The gender ratio was roughly even with 11 males and 10 females. The median age of participants was 18 years (range: 15-19; average: 17.7 years; SD: 0.97). There were no dropouts in this study.

WORKSHOPS

Two workshops, one in the beginning and one at the end of the project period, were organized to orient, train, and share experiences. Participants were encouraged to discuss and comment on a variety of topics. The materials and method for this training were similar to the previous Photovoice project run by the Initiative with diverse adult men and women residents of the same neighbourhood. A short questionnaire was administered at the beginning of the first workshop to collect contact addresses and demographic information of the participants.

During the first workshop, participants were provided with definitions of health and neighbourhood and were encouraged to discuss the terms. Health and neighbourhood for the project were defined as:

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

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.

In this workshop the participants were also informed about the ethical issues involved in photography and the importance of taking consent from photographed subjects. Following the orientation, a young professional photo journalist delivered an interactive session explaining the use of disposable cameras and camera techniques for capturing concepts. He also stressed the ethics of photography and the importance of taking consent from participants. Sample photographs from other projects were shown to participants to expose them to various examples of ways photography can be used to express perspectives and experiences without putting themselves in danger.

The project, the roles, and contributions expected of participants were explained to the participants who were asked to read and sign consent forms for their participation in the project. Parent/guardian consent was later obtained for participants under 18 years of age. Participants were given the opportunity to practice taking photos before leaving the workshop with a written copy of their photography assignment. All 21 participants attended the first workshop.

After photos were developed, interns brought copies to the participants along with story writing guidelines. They were asked to select three of their favourite photos to write stories about. They were also asked to make one suggestion on how to improve the identified situation. Guidelines for story writing were the same as the previous Photovoice project run by the Initiative (Haque, Moriarty, & Anderson, 2008). Once the stories were collected, two researchers along with the three interns, worked together to build a consensus around the major themes identified by the participants.

In the second and final workshop, attended by 16 of the participants, the major themes from participants' stories were discussed in order to come to a consensus among the participants. The discussion was facilitated to encourage the youth to talk about why they felt specific ways about their neighbourhood and what actions needed to take place to make positive changes in their community. The workshop was recorded, and at the end, youth were given the opportunity to volunteer for a more in depth interview on camera to express their main thoughts about SJT. A small cash compensation of CAD$60, along with a thank you card and a certificate of participation designed by the three

interns were distributed to participants. The St. James Town constituency assistant to the neighbourhood's city counsellor was invited to the occasion.

Upon completion of the second workshop, the youth were told about the potential of a working group to take action on the results of their research. Participants were encouraged to sign up to volunteer as part of the working group and this yielded a group of five members.

Data

COLLECTION

The participants were given two weeks to take photos of neighbourhood attributes that they perceived to be important for their health and well-being. 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 either with the intern who recruited them for the project, or at the project office. To keep track of the cameras and participants, the cameras were labelled and numbered and the information was entered into a database.

All 21 cameras were collected and the photos were developed. Each participant was 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. Four of the participants only submitted two stories instead of three. Through this process, 59 photo-stories were collected for data analysis.

ANALYSIS

The youth's demographic data were entered in a spreadsheet and analyzed. The analysis of the qualitative data involved two methods. First, the three interns and the two researchers working on the project read the photo-stories separately and identified the authors' key themes and messages regarding each photo. These themes and messages were discussed until the researchers and the interns came to a consensus. Next, the themes and messages were reviewed with the participants during the final workshop and feedback was requested to confirm or rectify the conclusions made.

To enhance methodological rigour of the analysis we further explored the details captured by the 59 photo-stories by doing content analysis using NVivo 8, a software program designed to assist in qualitative data analysis. Words and phrases from individual stories that represented similar ideas or themes were grouped together. During the analysis specific attention was paid to the ways in which health and neighbourhood experiences vary by gender. The content analysis was performed by one researcher and reviewed by a second. Results were compared and contrasted with conclusions from the final workshop. During the analysis, specific attention was paid to the ways in which health and neighbourhood experiences vary by demographic variables.

Results

PARTICIPANTS

All participants filled out a short demographic questionnaire at the beginning of the first workshop. The results show that:

• The average number of years all participants have been living in SJT is 7.3 (range: 1-17 years).

• Nearly half (43%) of participants had not yet received their high school diploma and 29% had finished high school but had not yet attended a post secondary institution.

• The majority of participants indicated they were born outside of Canada (n = 16; 76%)

• Slightly over half the participants were Muslim (n = 12; 57%).

• Participants represented a wide range of self-identified cultural groups including Middle Eastern, Spanish, Filipino, Somali, Vietnamese, Sudanese, Chinese, South Asian, and Canadian.

• The majority of females sampled moved into the neighbourhood relatively recently compared to males, with females having lived in SJT an average of 3.6 years (range: 1-8 years) and males an average of 10.6 years (range: 1-17 years).

• Among all participants, 43% worked throughout the school year, 38% only worked during school breaks and holidays, and 19% did not work at all. Gender played a significant role in work status with females being more likely to work both during school and during breaks than males. We speculate that this finding may be mediated by length of stay in SJT, as females from our sample are newer to the neighbourhood and their families may require more financial assistance.

• Among male participants, non-Muslim males were more likely to report working throughout the school year.

The findings indicate that the youth have a broad understanding of health, acknowledging that physical and social structures of the neighbourhood have implications on their health and well-being. Most stories explore and highlight social determinants of health rather than health care as the main source of opportunities or deficits for achieving neighbourhood and personal health and well-being.

The themes captured in the participants' photographs and stories are divided into two main categories: 1) Health in St. James Town, and 2) Suggestions for Improvements. The first section is a description of the neighbourhood and its implications on yiouth health and well-being, and the second section consists of ideas posited by the youth for improving the concerns they raised.

Neighbourhood Quality

The following quotes discuss the youths' most valued features of St. James Town as well as some of the issues that affect them.

PARKS AND GREEN SPACE

The youth valued parks and green spaces in their neighbourhood where they could meet with friends and have fun. These spaces are perceived as great sources of relaxation for people of all age groups and cultures who are looking for opportunities to get outside of their apartments.

Parks and public spaces contribute to social wealth. Everyone in this area such as kids or adults is going to that park (Rose Avenue field) to play sports, walk around to have fun. This field of this school is like park for people of St. James Town. During lunch time

when the kids have break they all going to the play grounds and make a lot of noise and they are having a lot of fun. This park is also a place where you will meet other people and gain friends with different background and cultures. Relaxation take place, most of people of different ages from babies to an old once you've seen them in the park and most of the woman are doing some small business in their own apartment and they also bring some stuff in the park to sell them.

Rose Avenue Park is also a very popular park for the children and its huge soccer fields is also a very common place for everyone. It is common to see little kids play soccer in the field with older youths and even seniors playing tennis.

Youth particularly valued the basketball court because they felt these spaces allowed them to play within the neighbourhood and kept them off the streets.

The Nike court is the only full basketball court in St. James Town other than the one in the Wellesley Center and the only outdoor full basketball court in St. James Town. There are other places to play basketball in St. James Town, but those are all rims to shoot around in but not play a full court game.

As a child, one way I kept myself occupied with my time was through playing basketball. It not only kept me off the streets, but also wasted the majority of my time, keeping me active. If more community programs ran such activities, it would bring the community closer and keep children off the streets away from any type of violence. These activities are strengths in our community as children are kept away from trouble. It should be part of any child's

childhood memory as they spend their summer days having fun, rather than getting into trouble.

Many participants highlighted the aesthetic importance of parks and green spaces. They considered the presence of well-maintained green spaces and parks as having positive impacts on youth well-being.

When I look outside my balcony, it's nice to see the beautiful green trees and the community pool especially after rain. The trees also make the neighborhood more attractive and inviting and not only are a benefit aesthetically, but also help to clean the air. The neighborhood needs to be greener and the trees from the view of my balcony are a very good start. I have one of the nicest views of the neighborhood; it shows off the positive things about St. James Town and shows that the area has potential to be a better place. The neighborhood needs to be greener and the trees from the view of my balcony are a very good start.

In a community school field, this picture shows a number of children playing soccer on a summer day. It reflects back to my life as it was a school I use to

attend and school field I use to play on as well. These activities are strengths in our community as children are kept away from trouble. It should be part of any child's childhood memory as they spend their summer days having fun, rather than getting into trouble.

RECREATIONAL FACILITIES

The Wellesley Community Centre is one of the latest additions to the neighbourhood's amenities and it has become one of the most valued resources among the youth.

Although this community centre may have been build for many reasons, in my opinion I think was build to allow the residents of St. James Town to have resource they deserve and to have a second home. Through the Wellesley Community Centre we can see what a huge impact it can make in a small area with a huge population. The policy makers can learn that things such as centers have a bigger impact on a community, instead of building more buildings.

The community centre provides a healthy outlet for children and youth in the neighbourhood, alleviating parental stress and giving the community a vast range of opportunities to improve and enrich their lives.

The Wellesley Community Centre has been in St. James for the past four years, and has given a huge plus for the St. James Town residents. With a community centre now to take youths out of the street, and a place where even parents can come in and learn English and still have their children watched over them, St. James Town has something to be really proud of.

… Some kids are left out of the activities and feel lonely so therefore seek acceptance from any group they can get there hands on. Sadly some of these kids turn to gangs, drugs, and violence. They do this because they have nowhere else to turn to since the community centers are only open for a limited amount of time and are closed of statutory holidays and strikes. This is a major problem of our neighbourhood and one way we should resolve it is by making more activities for our youths to participate in, making bigger parks, and keeping recreational facilities open longer.

… Now parents don't have to worry about their children's whereabouts and youth in the neighbourhood have a place to "chill" and at the same time be safe. However the best thing about the Wellesley Community Centre is that now we have our own public library that the whole neighbourhood can enjoy.

The community center allows kids to stay out of the streets to give them a variety of facilities to use.

Neighbourhood amenities that allow residents to engage in physical activity have a direct influence on health. Pools, gyms, and weight rooms are among the many places that consistently come to mind when youth in this project are asked to discuss health-promoting neighbourhood features. These facilities promote physical health while working preventively to keep children and youth involved in safe activities.

The pool is a great place for all the kids in the neighbourhood to go and cool off on a summer day and it's nice to see that kids have a safe, fun, free place to enjoy themselves over the summer right in their own backyard. The pool is an asset to the neighbourhood because it brings children from the community together, it's a great place for people to make friends, bond and create summer memories.

Person likes to swim specially kids, because they have lot of fun with their friends, their parents will not be worried when we have everything close to our neighborhood. The sunshine is very good in the summer we don't have this kind of weather all years. So kids are really excited and happy to swim and play around the parks.

The weight room is open every day for people to use, different times for different genders. The gym which is also open every day has a variety of different activities to suit everyone with open gym a majority of the time. The gym shelters people from the streets, giving them a place to play under the supervision of staff members. If a fight is ever sparked it is easily broken. If a dispute ever arises it is easily put down. The programs the Wellesley Community Center provides allows people to stay in shape or have a place to exercise. The best thing about the center is that it is absolutely free.

However there are some limitations to the positive impacts that such facilities can have. Many of these limitations revolve around availability – whether it is time or space, these facilities could benefit from having more.

The center closes at 9 p.m. on weekdays and 5 p.m. on weekends. This allows kids to go to the streets to play where they are exposed to an unsupervised environment where drug dealing and fights are often seen.

In this picture in shows the only swimming pool in St. James Town which is just wrong, with a population of 17,000 registered into the government books and the other 15,000 who are invisible it is literally impossible to fit all of them into one pool. This is an issue in the community.

In a community where 73 percent of the population is immigrants, parents have to work to put food on the table and so the kids are home alone. They will eventually go out in the summer when it is extremely hot and if the swimming pool is packed, it is likely the child will leave and play somewhere in the street. When they are in the street, they are exposed to bits and pieces of bad things. Eventually they will get curious and see why they are so bad themselves and they become criminals, drug dealers or even drug addicts. This is why there needs to be more swimming pools and more after school and summer activities for kids.

Also swimming is way to prevent child obesity.

Other limitations of recreational facilities may be the safety concerns of using them.

The Nike court also is right between two buildings. One of the biggest hazards for this is that objects tend to get thrown from the buildings onto the court. If these objects actually hit anyone it seriously harm them if not kill them.

PLACES OF WORSHIP

The neighbourhood church is known for the positive services they provide to residents in the community. Their impact on health and well-being goes beyond just helping those that they serve directly; their services create a warm and caring sense of community which can foster mental well-being in the neighbourhood. The following two quotes were written by youth who do not share a religious affiliation with the church they are praising, showing the youth have the capacity to appreciate other religions.

In this photo we see the Trinity Evangelical Lutheran Church, a catholic church located on Sherbourned Street.

In a way this can relate to our health because there are many other things that have to do with health and not just physicalness but also emotionally. People pray and worship what they do to make themselves feel better and that has to do with our health.

In the church they have an ESL class for the newcomers to learn English and help them to communicate with people I heard the teachers are really kind and friendly, I think they have housing for the homeless people in the basement of the church because the population is a lot in the small area most of the people cannot pay the rent so they become homeless and the good and safe place is in the church for them and they providing food for them. In the weekend I see a lot of people are going to pray and it shows that people still remember their religion. It related to our life, because there are so many good things happening in the church and outside the church. Sometimes when I walk to school I see there barbeque parties going on and I see everyone is enjoying and feel happy to live in St. James Town.

As a highly diverse neighbourhood, St. James Town has a large number of residents with different religious backgrounds. The residents need neighbourhood places of worship that adequately reflect their diversity.

It is unlikely to see many other worship places from different religions in St. James Town that is something we lack in our community. I personally am Muslim and the only place I know that is actually in our neighbourhood where myself and my fellow Muslims can pray and worship is in a basement in one of the buildings. I'm not saying that we should have an amazing mosque or anything however it is unfortunate that we have to walk 15 to 20 minutes to get to a proper mosque. This issue relates to our lives because of the fact that there are lots of different religions in the community and many people would like a place where they could come and worship with their own people, although it may cost a lot of money to make sure every majority religion is covered I think it is only fair if you see the many people who live in St. James Town.

SCHOOL

The neighbourhood school, Rose Avenue, is a prized feature of the community. Located in the heart of the neighbourhood and in the centre of all the apartment buildings, Rose Avenue connects residents through a common interest: children. The school is valued both for the education it provides children and also for its

field, which is well maintained and used as a park for residents of all ages and ethnic groups to use. Many of the previous quotes about parks refer to this school field.

This is a photo of Rose Avenue public school, the only actual school in St. James Town. Rose Avenue's park is also a very popular park for the children and its huge soccer field is also a very common place for everyone.

This is good for our health because children are getting an education they deserve and will get so the future could be better. This strength exists because of the strong community involvement with the school. All the parents are all in the parent council meetings and voice their opinions which benefit the school.

This strength exists because of the strong community involvement with the school. All the parents are all in the parent council meetings and voice their opinions which benefit the school.

However, it relates to us in a bad way because it has this other side to it, a side that started recently, the other side of Rose Avenue is that there has been negative things happening at night that deals with drugs, fights and many others.

PLANTS AND FLOWERS

The youth in this project expressed a strong affection for the few flowers and plants in the neighbourhood. They admire the plants' beauty and remark at their ability to improve mood.

Flowers give humans a chance of breathing fresh air, thus, it's useful for health. By seeing different flowers our mind get energized. The smile comes to our

cheeks and we cheer up by seeing it. These shops are in front of Sherburne Subway Station. Lots of people see these flowers everyday and their day starts with success and smile.

Almost everyone in this area gets some flowers from this shop. There are different varieties and colours. Every morning I pass through this shop and get fresh air and stay for awhile to watch the beauty of the flowers and then go to school. My school day starts greatly because of this fact.

This image gives the neighbourhood a vibrant, peaceful and beautiful effect. It also relates to our lives because it is said flowers can help ease tension and mellow the mind. A reason that these flowers are related to health apart from the calming aspect is that it also increases plant life, breeds new ecosystems, and reduces some of the harmful gasses in our atmosphere. This is a good thing and also a strength of the community because it helps the overall appearance of St. James Town.

Since St. James Town is a heavily populated neighbourhood comprised mainly of concrete buildings, flowers and plants are few and far between. The youth discuss the unfortunate effects of having too few plants and flowers, and offer some solutions to the shortage problem.

This flower may look like an ordinary flower, however it represents so much more. It is unfortunate that we don't see many gardens around or plants being planted around the neighbourhood. This also relates to our health in a bad way because our neighbourhood is filled with only buildings making it look depressing to walk through.

DIVERSITY

The youth also feel that St. James Town's diversity is a point of pride for the community. Particularly within the Photovoice workshops, which are not quoted here, diversity was highlighted as many participants' favourite feature of St. James Town.

The final picture I chose was a wide assortment of flowers outside one of the buildings in St. James Town. I think a metaphor for these flowers could be the diversity that is represents in our community, and the different but appealing nature of each culture. 2001Besides the actual school, if you were to come to Rose Avenue on a sunny afternoon you would be amazed to see all the people from different backgrounds, age groups coming together.

On one side of the bridge, there exists a neighbourhood full of new immigrants who have come from around the world to be part of Canadian Society.

Physical Factors

The following quotes discuss a series of physical factors that influence quality of life.

PARK MAINTENANCE

Given the importance assigned to parks and green space, park maintenance can have a large impact on multicultural youth health and well-being. If park spaces are not well maintained, not only will the youth not be able to reap the benefits of such spaces, they will also be negatively affected by the poor safety and poor image that develops.

Although there are a lot of park, not all of them are in same condition as the other parks. The playground in one park may be more accessible and fixed while the playground in another park may be damaged and really dirty. This could also lead to injuries, for example, a kid could get injured for playing into a broken playground.

The picture I choose, picture four may look like an ordinary park sign located at Bleeker St. However

as you are able to see that the sign doesn't even have the parks name on it. It is also unfortunate the only park in the neighborhood that has swings and since swings are usually the most popular things in a park most children would rather go to this park. I know my little cousins love this park but aren't allowed to step foot in it because of all the negativity around it. This park relates to our health in a bad way due to the fact that it is dirty and there has been things such as needles found on the floor of the play ground which is unsafe for both kids and everyone else.

Do we want children growing up in ugly neighbourhoods that may be dangerous? It is clear to that this bench relates to our health in bad way, because the vandalism on the bench is plagues with negative connotations that need not be seen.

BUILDING MAINTENANCE

The only problem the youth highlighted about the residential building interiors was the tendency for the elevators to break down, and then the extended period of discomfort experienced while the elevators are being serviced. Such a problem is exacerbated by the buildings' high residential occupancy which further strains the working elevators.

This picture depicts a broken elevator. The only thing that's more clustered than the St. James Town neighbourhood buildings and the apartments are the ele-

vators. The elevators average maximum capacity is usually 10 persons on it at once but in reality there are around 11 to 13 people using the elevators. This is because of the long waits for them; people get restless and stuff themselves in. The long elevator waits usually stress out the residence, and stress usually leads to many diseases and depression. The elevators also affects the health of people because disease is easily spread in clustered places like elevators especially when they are over flowing. The alternative solution to using the elevators is the stairs, but the stairs are very dirty filled with garbage and urine. Also the stairs are not very popular amongst the higher floors. Also a couple of years ago someone was shot and killed in the stair well, there were no cameras in the stairwell unlike the elevator so it's not as trusted as the elevators.

These elevators break down and usually take up to two weeks to get fixed, that means that's two weeks of pushing and cramming in the elevators. The elevators also affects the health of people because disease is easily spread in clustered places like elevators especially when they are over flowing.

OVERCROWDING

Overcrowding in St. James Town affects more than just the elevators. The youth in this project are weary of new high-rise condominiums being built around the neighbourhood, commenting that the already

existing residents lack the open space and services they need.

...In a neighbourhood such as St. James Town where most people live in high rise buildings and come from low income families it may not seem like the best idea to build more buildings when we don't already have that much green space around. This issue relates to your lives because we need more things than buildings around our community, such as more parks, centres for youth but instead we invest in building and more buildings.

The community of St. James Town already has too many housing complex and they are planning to make more. This picture shows some of the 19 high-rise buildings not including three of the new condominium, which would make it 22 buildings in St. James Town. The community of St. James Town already is over flowing with people of all ages and yet they are still building a 32-storey building. This is not good for this area do to the limited sources and services.

Space is such a commodity in St. James Town that poorly utilized spaces attracts attention for being wasteful.

To see an area being put to waste rather than it being used for resourceful purposes really hurts me as a resident living in St. James Town. A community with approximately 17,000 residents living within a 32.1-acre diameter shows that they should use those acres they can access. It also relates to our health because these areas of abandon houses stands out like how

your thumb stands out when it's sore or bruised.

GARBAGE

Garbage issues in St. James Town are caused by poor maintenance of garbage facilities and by resident garbage disposal behaviours. The number of responses from youths discussing garbage, littering and recycling was overwhelming. Garbage has long been one of the signature problems of St. James Town and has always been highlighted as a problem by residents.

All some of us see in this picture is just an overflowing garbage...so what? I mean who really cares about our health.

In addition to health problems, it has also brought up psychological problems. People are really frustrated. Some are being helpful. They cover the garbage with plastics, but it doesn't really work.

Another problem I found in the St. James Town neighborhood our dead animals left around streets, parks, and field all over our neighborhood. These dead animals end up in the places where children hang and play around the most.

It appears that many residents do treat their neighbourhood well by choosing not to litter on the community centre grounds, even when there was a strike.

Even though the centre was temporarily closed, the surroundings of the centre were kept clean. Evident from the picture taken, the field was not littered with garbage and the centre's walls were not vandalized. People were still considerate, even though the services of the centre were unavailable to them for quite some time. This is one of the strength of the neighbourhood because from this picture, one could learn that people still respect the signs of no littering, recycle bins, etc. Therefore, people could consider the neighbourhood as a clean one with respectful neighbours. This type of image could encourage the community to be more respectful of the environment. With a good neighbourhood image, people would feel more secure and comfortable.

However, there are still many residents who litter around the neighbourhood's buildings, parks, and streets, creating an environment that the youth find unattractive and unhealthy.

There are people in our neighborhood littering advertisements on the street and local areas. Those who litter are creating an unhealthy environment for everyone in that atmosphere. Maintaining a safe and healthy environment in our society has a direct relationship to health of community residents.

I always find myself concerned on how people litter advertisement mails. I think people should not litter them instead they should put in the recycle bin. Or give it to someone that interested in. Those who litter are creating an unhealthy environment for everyone in that atmosphere.

As a community, we should know better than to litter at all, especially on school property, near playgrounds and basketball courts. This image would be a great picture to inform the community on this increasing issue. As time goes by, the garbage will only continue to pile unless we step up and make a difference to make it clear to everyone that school yards aren't garbage sites.

I see that people are living in apartment buildings like to litter their garbage outside their building making a big impact on the residential areas of our homes and environment.

Some garbage issues stem from the lack of recycling facilities and the lack of knowledge about recycling and proper disposal systems.

These bins are placed outside of the community centre, where people visiting the centre will easily see

them. These bins have signs that encourage people to recycle. These bins also encourage people to properly dispose garbage and not just throw them out anywhere. Unfortunately, there aren't a lot of trash cans like these around the whole neighbourhood. People often find it hard to locate these trash cans while walking around the neighbourhood and end up throwing their trash anywhere.

This is a huge problem in our neighborhood the fact is over 70 percent of St. James Town do not recycle, some of them may not even know what recycling is. If people in the community don't even know what recycling is how can we expect them to think of our environment. This problem exist because we lack communication in our neighborhood, we expect people to do the right thing without educating them or showing them the right the way.

This image can educate the community by realizing that if they don't start caring one day St. James Town can end up looking like this. It is time that we as a community take a stand and do what's right for us. In order to solve this problem we need more signs on recycling, classes to assist people on how to recycle and most of all encouragement.

Social Factors

The following quotes discuss a series of social factors that influence the quality of life in St. James Town.

COMMUNITY

There is often a strong sense of community in St. James Town which can make residents feel welcome and cared for, which promotes mental health and well-being. The youth feel that strong community relationships can have protective influences on people's well-being.
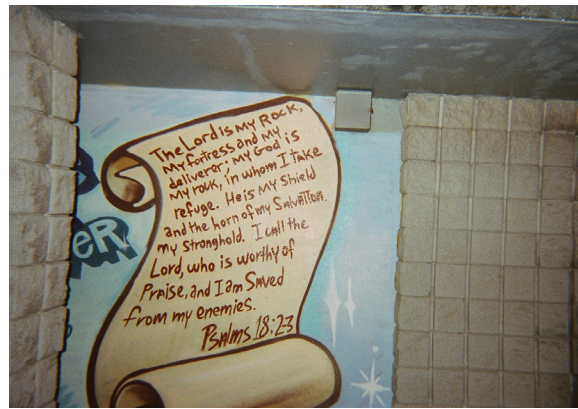
The joy of St. James Town is that everyone knows one another and it doesn't matter what age you are or what background you come from because at the end of the day we are one community.

We may not have a lot of money, but we have each other.

During the memorial, a lot of people came to pay their respects to the fallen victim. Many people attended the memorial; some people didn't even know the victim but came anyway to pay their respect.

However as part of the community, the St. James Town youth feel that everyone has a responsibility to keep the community healthy. Residents who engage in activities that can harm health are looked down upon by some.

This is related to our lives because every day we are witness to some type of harmful carcinogens produced by these cigarettes. Whether second hand, or first hand smoke, living in St. James Town means a high chance of encountering cigarettes. Because of this more people are exposed to harmful chemicals.

When residents band together, they can also increase

their collective efficacy for making positive changes in their neighbourhood. In the youths' suggestions for solutions to existing problems, they frequently site the power of residents coming together to advocate and act for change.

We as a community need to engage in useful conversations to come up with ideas to help make this area useful rather than abandoned.

One thing to eliminate this problem is to have a fundraising to help restore the damaged playgrounds. The community should also learn how to clean the park and policy makers should see to it that the parks are cleaned. Having more garbage bins around the park could also help.

To clearly address this garbage problem, the community should come together to clean up areas like this school yard to make it a safe area for children.

This issue exist because of the lack of knowledge that the community has about the resource the city of Toronto has. This is can be fixed with a seminar in the Wellesley community about how we can get more swimming pools in the community or if that is not possible we can have a community petition and send it to David Miller to show him that the residents of St. James Town care about their programs.

So after all these points, the ideal solution to efface this obstacle is to build relations with the kids by opening up after school programs which will keep them occupied and of the streets.

I think this is a problem that we as a community should fix, instead of waiting for the government to come and fix it. Although this is a public park and it is the government's responsibility to clean it we know that that may not happen so soon, so instead we should clean it ourselves.

VIOLENCE AND CRIME

There are multiple safety issues causing the youth in this study to fear various aspects of their neighbourhood. One of the most salient concerns is night time safety in the neighbourhood. A number of youths feel it is unsafe to venture out at night, particularly in parks.

It is a problem that after 12 a.m. going out alone is kind of suicide to residence. I have been in trouble many times that now I try not to go or if I want to go I go with my friends which is more safe for me.

During night time this area is not really safe, because in a neighborhood where a lot of gang plays, bad crime and other bad things happened and a lot of young boys and girls are coming at night time to smoke and sometime when they got drank they start fighting with people and with themselves. In my opinion that area is not safe at the middle of the night and we need more security there.

The bad things that people are not safe to walk from there specially at night time because a lot of drugs dealers are using drugs in the tunnel and it relate to our health as well, because many years back there was a big fighting between two gangs and one of the boy gat shot and killed.

The other side of Rose Avenue is that there has been negative things happening at night that deals with drugs, fights and many others.

This is a photo behind the Sherbourne station, it is another way to enter and leave Sherbourne Station. This little alleyway has scared me ever since I was little. The fact that it is dirty and deserted and mostly scary in the dark.

SECURITY

Because of the presence of illegal activity and the safety concerns it causes, the youth suggest stronger security measures for the neighbourhood to ward off danger and ensure a safer living environment. They consider the current security levels to be inadequate for the neighbourhood's needs, and that safety and security are integral to good health and well-being.

Bike theft is upraising problem growing in our community. If people can't trust to lock their bike outside, it means that the community is lacking security. And a lack of security means people don't feel safe in an area and may cause them to move out or not even go outside. Ways to solve this problem could be installing more security cameras, or even having security 24/7.

Believe it or not, every single bicycle I've ever owned has been stolen. In fact, I've never had a bicycle for

more than two years because of these pesky, low-lives everyone calls bike thieves.

I remember it like it was yesterday; gun shots would be heard more often, crack heads would enter the building so frequently you'd think they lived there, and the community's frustration was at an all time high fearing for their own safety. This is why the cameras were set up. They aren't meant to stop all these things, but it is a step towards preventing them. The cameras won't end all our problems, but it definitely gives our community assurance knowing that bad guys will think twice before doing anything. 2301

The picture shows a memorial of a residence of St. James Town whose life was robbed off him last year due to gun violence. The person who murdered "Juice" is yet to be found. It just comes to show that more security is needed in the area.

I bring up the security point up because to be shot down in broad daylight without any securities around is unacceptable. I'm not saying that the incident could have been avoided, but at least the suspects could have been caught and put behind bars where they belong.

HOMELESSNESS

The youth in this project are very understanding of the life circumstances of homeless people, feeling strongly that they should be taken care of and given plenty of resources in order to help them get back on their feet. At the same time, they are concerned about the potential danger they can pose to the rest of the community.

When I was in Afghanistan, I could never imagine

North American societies have people without shelter, without house and without food. The state of homelessness has brought many big serious issues to our community. In detail this controllable incident has direct relation to our health. We the residence of the community should find a way to protect ourselves and the homeless people from this matter of fact which is happening to the people of North American society.

The first picture I chose was of a homeless man and possibly a drug addict around the vicinity of St. James Town. This relates to our lives because there are multiple homeless men, as well as drug addicts that live in the area. Sometimes these people can be a source of crimes and give the neighbourhood a bad image. Often these people leave behind trash and other drug related items lying around on the streets. This can affect the mental well being of the society, especially on little children who grow up with these images. The trash also is dangerous to our health. This is a bad influence on our neighbourhood and weakens it.

ECONOMIC ENVIRONMENT

Few of the youths identified economic risks and barriers as pressing issues that influence neighbourhood health and wellbeing. While residents of St. James Town have a household income of nearly half that of the rest of Toronto, it appears from our findings that perhaps most of the burden is carried by parents while youths are spared from the majority of the stress. The youths who did focus on economic risks and barriers did not speak about firsthand experience. They did, however, show a great deal of understanding and compassion for others experiencing financial problems.

The big issues around in this area are about money including the cost of living income and employment.

Money also leads to better access to health most people living in St. James Town do not have money to go to the doctor and most of them do not have money to pay their rent. The money earned by some people is not even enough to properly feed them.

Some residence of St. James Town cannot afford the luxury of paying for gyms like the YMCA.

Photovoice Themes: Suggestions for Improvement

Macro-Structural Level

The youth in this project emphasized the potential of the government and policymakers to make changes in St. James Town in order to address many of the health concerns they identified. The youths' comments suggest that changes at the policy level can affect a wide range of concerns. The following are some of the strongest statements made by the group.

PARK MAINTENANCE

[Neglect in parks] could also lead to injuries, for example a kid could get injured for playing on [a field or basketball court]. Policy makers should see to it that the parks are cleaned.

RECREATIONAL FACILITIES

By allowing the community centre and the gym to open for longer hours, it will allow kids to stay indoors longer so they do not go on the streets. This picture should allow policy makers or the city of Toronto parks and recreation to open community centres for longer hours on both weekdays and weekends. The Nike court should have a roof to it, so when it rains people can still play basketball instead of running

home. This picture should be able to educate policy makers by depicting to them that we need a roof over our single outdoor basketball court.

GARBAGE

To maintain a good image of the neighbourhood, policy makers should encourage the community to keep the neighbourhood clean and green. To promote this type of neighbourhood, campaigns of cleaner and greener environment should be more active.

More garbage cans should be put out and signs should be made that littering is not allowed to decrease the amount of garbage littered. More attention is needed on issues like this because when everyone ignores it, it will only get worse.

This problem could be solved by placing more garbage bins around the neighbourhood and putting in more recycling rules and signs.

PLANTS AND FLOWERS

[Flowers are] a good thing and also a strength of the community because it helps the overall appearance of St. James Town. This could help policy makers to think about increasing projects that have to do with plant life, and add more flowers and plants to increase the appeal of the neighbourhood.

The proper solution for this problem will be to make an assessment in the community and find open spaces and ask the governing body to give us a permission to plant our neighbourhood.

BUILDING MAINTENANCE

Policy makers should make it mandatory for landlords to fix broken elevators a day or two after they are out of service because it really gets people behind schedule waiting long minutes for them.

This picture should show policymakers that to avoid death; we need more security because this (gun violence) can happen to anyone.

This could educate policy makers to take action to stop such people from living here, but even more effect-

ive would be programs to help these people such as rehab seminars, counselling, and other assistance.

SECURITY

A lot of undercover police are in the area dressing up as drug dealers or buyers but they are usually easily spotted and pin pointed. Instead of having undercover police which are easily figured out, we should have constant security in the area. This picture should show policymakers that to avoid death; we need more security because this (gun violence) can happen to anyone.

HOMELESSNESS

The country is rich, but the capitalism made the politicians and rich people blind to see this problem and help this unjust action to get it finished. This image should tremble the policy maker's hearts and made them think about the homeless people and the residents that might get infected of those problems that these people are fighting with. I think the best part is to educate the policy makers about this problem. Let them be inside the problem.

Community Level

Suggestions for improvement at the community level are actions that do not require the attention of higher authorities. Sometimes the suggestions are considered the responsibility of the residents; other times the suggestions are for the residents only because of the general feeling that the government will not help.

I personally think that everyone can make their individual contributions towards maintaining a clean

environment in the community they reside in, to enjoy a cleaner environment.

I think people should care more about this park, since we don't have many public parks in our neighborhood. Our community should open their eyes and start caring about things such as this, if we don't take action in making our neighborhood clean and safe then who will? I think this is a problem that we as a community should fix, instead of waiting for the government to come and fix it. Although this is a public park and it is the government's responsibility to clean it we know that that may not happen so soon, so instead we should clean it ourselves.

We youth in the community need to plant more and also advocate for others to do so. At the same time teaching the importance of plants in the city especially, the neighbourhood like St. James, which has a lot of family and who live with their children has to be more encouraged.

To achieve change, sometimes it is necessary for residents to call on the support of others government officials in order to evoke action. As one youth describes, it is "good to educate the community by caring and taking a stand for their rights, and beliefs."

This image can educate the community by telling par-

ents that they need to complain to the city to fix up this problem so that it can be safe for their children to play safely in the playground without getting hurt or catching a sickness. What can we do is well complain and tell the city of Toronto that these portables need to be remove or at least fix up the gapping holes.

One thing to eliminate this problem is to have a fundraising to help restore the damaged playgrounds. The community should also learn how to clean the park and policy makers should see to it that the parks are cleaned. Having more garbage bins around the park could also help.

Discussion

This study explores how multicultural youth in St. James Town perceive their neighbourhood to play a role in their health and well-being. The youth in this project were asked to tell the story of how neighbourhood factors influence their health and well-being, for better or worse. They shared with us a rich collection of photos and stories each evincing the distinct features of their neighbourhood that play a role in their health. In brief, it is clear that the youth in this project feel SJT has some wonderful attributes and a great deal of potential; however these assets are often undermined by the neighbourhood's negative qualities, many of which are considered avoidable. SJT youth take an optimistic and improvisational approach and believe that with the right attitudes and actions, the residents of St. James Town can transform their neighbourhood into one of Toronto's best.

The most important themes to emerge from the youth's photo-stories revolve around the physical and social factors that inhibit and promote neighbourhood health. The photo-stories focus on issues such as overcrowding, safety, and garbage. In general, the youth feel that neighbourhood spaces require action to sufficiently provide an environment that cultivates young people's health and well-being.

VALUE OF PUBLIC SPACES FOR RESIDENTS

The two neighbourhood places most widely valued by the youth were parks and recreational facilities. These are public spaces: they are outside of the home, they are low to no cost, and they host a broad range of activities. Among the activities that are most valued in these spaces is socializing. Everyday public spaces facilitate social interactions which can provide relief from daily stresses, enhance social networks and bonding, and improve mood. A survey of people using public spaces found that urban green spaces are frequented by a range of groups from their neighbourhoods, thereby assisting inter-ethnic interaction among children and youth by helping them to form relationships across cultures and develop understanding and tolerance of each others' differences (Seeland, et al., 2009). Parks also have enormous potential for promoting positive experiences and memories, which in turn develops a sense of attachment from its users. This attachment can aid in social cohesion and community development (Cattell, Dines, Gesler, & Curtis, 2008).

The youth also perceive parks and recreational facilities to play a positive role in their physical activity and fitness. This assumption is well supported by research. Among adolescent girls, engagement in physical activity is positively correlated with living near more parks (Cohen, et al., 2006), and studies of variables that improve youth physical activity found that proximity to parks and open spaces was positively correlated with the active use of those sites (Grow, et al., 2008). Consistent with previous research on immigrant youth, the youth in this project lead active and healthy lifestyles. They discuss exercise and sports as a large part of their recreational activities with friends, and they consistently praise parks, churches, the community centre and the school for their ability to contribute to their active lifestyles.

The impacts of public spaces vary depending on its physical features, the people who use them, and how they are used; however the value given to spaces for social and physical activities may be intensified among those sharing the participants' demographic attributes. SJT is a low income neighbourhood; therefore low- or no-cost places for social and physical activities are of paramount importance to health and well-being. Additionally, the participants in this project ranged in age from 15 to 19 and this stage of life is characterized by growing independence from the residential environment (Cairney, 2005). Neighbourhood factors outside of the home, then, are a vital feature of the lived experience of young residents. This can explain the salience of public spaces and the relative absence of housing issues addressed by youth this research project. It is important to observe the perspectives and experiences of this demographic to understand the impact of low-income and multicultural neighbourhoods on youth health and well-being.

A strong opinion among the youth in this project is that good public recreational spaces can mitigate the path towards street involvement among children.

The participants disclose that parents are often away working evenings, leaving young people unsupervised. A community centre with free services attracts youth and occupies their time with healthy activities. The youth in this project are cognizant of the dangers of street involvement, emphasizing the unsettling potential for youth to get involved in unhealthy and illegal activities. "Keeping kids off the streets" was seen as important to keeping youth on the "right path."

PHYSICAL FACTORS AFFECTING THE QUALITY OF PUBLIC SPACES

Park maintenance and garbage buildup influences the accessibility of public neighbourhood spaces. The youth's accounts of public spaces in St. James Town add to existing evidence that neighbourhood's parks in urban immigrant neighbourhoods are poorly maintained. The lack of maintenance has resulted in unsafe conditions such that using the park could be hazardous to a person's health. With broken benches, vandalism, broken needles and garbage strewn about, the neighbourhood's parks are not enticing to the residents. Parents do not feel comfortable with their children using these spaces, and this type of concern is frequently cited as a barrier to youth activity (Panter, Jones, & van Sluijs, 2008).

The observation that low-income immigrant neighbourhoods tend to have unsafe public spaces due to poor maintenance is critical in today's reality. Young adults have just recently been added to the Canadian Heart and Stroke Foundation's (2010) list of populations at risk of cardiovascular disease. Given that recreational opportunities in neighbourhoods are crucial to youth physical activity (Gilliland, et al., 2006), governing officials should consider the maintenance of parks in high needs neighbourhoods such as SJT to be a priority. Access to safe parks is positively associated with regular physical activity in urban areas, particularly among youth living in apartment buildings, unsafe neighbourhoods, and lower income families (Babey, Hastert, Yu, & Brown, 2008). Unfortunately, unsafe parks are common among underserved low-income neighbourhoods across Canada. Youth place so much value on parks as places for social and physical activities that poor park condition is considered a major health concern.

Overcrowding in the neighbourhood also threatens the availability, accessibility, and quality of public spaces in SJT. Research has shown that overcrowding leads adolescents to perceive spatial restriction and experience aversive reactions to their environments (Van Staden & Fred, 1984). In a neighbourhood where census data does not accurately represent the large population and where services are already limited for the projected population, space and crowdedness pose a substantial problem. Overcrowding has left the parks, recreational facilities, and other aspects of the neighbourhood strained, and this problem is likely to be common in other urban immigrant neighbourhoods with low incomes.

The use of parks and recreational facilities is important to all residents; however youth may be uniquely influenced by these spaces because of their desire to be autonomous and to explore their world. When these areas are inaccessible, youth are faced with the predicament of finding alternative locations for leisure. A healthy neighbourhood should have adequate space for the residents to utilize.

SOCIAL FACTORS AFFECTING THE QUALITY OF PUBLIC SPACES

Safety is a major concern for the youth in this neighbourhood. Caution must be taken when venturing the parks at night, as the evenings in this neighbourhood can be dangerous as a consequence of gangs, violence, and drugs. Some of the project's participants have admitted being fearful walking through neighbourhood parks at night; as one youth describes, "going out at night is a kind of suicide." Fear of walking through a neighbourhood's parks after dark can constrict a person's choices and autonomy; therefore safety issues can be damaging to health and well-being of youth who particularly value and enjoy freedom. For youth, who are particularly interested in activities outside the home, fear of night time activities in their neighbourhood may force them to make a choice between staying inside or trekking further from their homes and into less familiar neighbourhoods. Either choice of staying home or going out could then pose a number of potential disadvantages to youth health and well-being.

Research has documented that exposure to crime and violence and stress created by constant fear of one's safety creates high levels of mistrust, impacting youth health and well-being. A study of fear of crime found that most youth in neglected neighbourhoods take precautionary actions when going outside at night (Williams, Singh, & Singh, 1994). They found that 91% of these youth take defensive actions such as finding an escort or carrying a defensive weapon, and females are 25% more likely to indicate requiring an escort at night. Age appears to play a role in perceptions of fear

in the community with older adolescents feeling more secure. Fear for safety can have detrimental effects on health and well-being as well as community cohesion. A longitudinal analysis of the interplay between fear and health reveals a cyclical effect whereby mental health and physical function are severely impaired by fear of crime, and in turn this weakened health heightens worry about crime and perceived vulnerability to victimization (Jackson & Stafford, 2009).

Some gender differences appear to play a role in the youths' dialogues about fear and crime in their neighbourhood. Research to date has determined that females are more fearful of crime and victimization than males (Bayley & Anderson, 2006; Jackson & Stafford, 2009), and the females in our study were more likely than males to discuss night time in a fearful tone. However our sample shows another potentially diverging trend. Females in our study generally appear to be more afraid of dangers caused by poor maintenance, such as dangerous objects, broken playgrounds and bike racks, whereas the males in our project seemed more occupied with concerns of crime, gangs, and security. These differences may be associated with exposure differences among the genders, as males are exposed to more violence than females (Hanson, et al., 2008). A more detailed exploration into the various causes for concern could help to understand the pathways through which fear and safety in neighbourhoods impact multicultural youth health and well-being differently among the genders.

Some of the youth in this project were especially concerned and appalled by the presence of homelessness in Canadian society. Images of homelessness in their neighbourhood created passionate stories about how we should be taking care of one another to prevent or look after the homeless. There was also the feeling that homelessness in the neighbourhood signified danger in the community. Such feelings may be associated to perceived neighbourhood cohesion and safety. Research has suggested that perceiving a lack of cohesion and safety in one's neighbourhood detracts from the health and well-being of residents, and that the perception of safety is strongly influenced by social cohesion in the neighbourhood (Baum, et al., 2009). Homelessness in the neighbourhood, therefore, may contribute to poor health and well-being because it indicates low social cohesion which is strongly associated with danger.

DIVERGENCES FROM ADULT PERSPECTIVES

This project, Multicultural Youth in Urban Neighbourhoods, follows a previous Photovoice study assessing neighbourhood effects on adult immigrant health. The youths' perceptions of neighbourhood factors influencing health and well-being are largely similar to the adults from SJT however a few dissimilarities have emerged. First, a number of the neighbourhood assets and concerns discussed among the adults were absent among the youth: Location of Neighbourhood, Transportation, Food, Health Services, and Newcomer Issues. Whether these issues were simply overlooked or they in fact play a lesser role in multicultural youth health and well-being is unclear. The themes discussed in youths` stories that were not significant within the adult sample`s are: Children, Flowers, and Diversity. These subjects are more conceptual and abstract than other subjects; nevertheless they are envisioned as being invaluable to the neighbourhood.

Economic risks and barriers were discussed among both groups, however the nature of the discussions are different. The adults from SJT have been very concerned with direct personal and familial experience with economic risks and barriers, such as under- and unemployment; the difficulties of being a newcomer in Canada, financial concerns that limit access to food, shelter, and recreational activities; and being poor relative to others in the city (Haque & Eng, 2011). On the other hand, the youths` discussions were further removed from the subject, as if it were a problem that did not directly affect them. Their concerns were more directed at others, namely homeless people in the neighbourhood and residents of SJT as a whole. This difference may indicate that parents of immigrant youth, who appear to be struggling with economic barriers, keep their children unaware of these difficulties. To understand these findings, future research should explore the impact of economic barriers on different age groups and life stages of immigrants.

Conclusion

Taken together, these findings show there are numerous neighbourhood factors influencing young multicultural residents' health and well-being. The youth in this project have emphasized the need for improvements in various spaces throughout the neighbourhood, and the participants offer many suggestions for action. Although many of the concerns highlighted in this project fall within the domain of government action, the youth also believe in the idea of sharing knowledge and taking grassroots community action to make positive changes in their community.

The role of municipal governance in mitigating and modulating the negative impact of urban environment

at neighbourhood level is crucial. Governance, defined as "the management of the course of events in a system consisiting largely in the policing of social relations, environmental conditions and the allocation of resources essential to well-being" (Borris, 2004), is an important pathway for addressing determinants of youth health and wellbeing in the urban setting.

In order to effectively address the issues voiced by multicultural youth, the municipal government will need to work with the youth to hear their voices, advice and knowledge. The city also needs to find new and innovative ways of engaging and working with multicultural youth, local communities, private sector and other stakeholders.

Strengths and Limitations

Findings from this study should be considered in the context of some limitations. This study is a snapshot of the SJT neighbourhood and issues may change over time. This project is a case study and was conducted in a small geographic area therefore caution should be taken when generalizing the findings. However, the opinions shared by participants in this study are consistent with other research on multicultural urban youth, showing an increased autonomy from the home setting and increased exposure to neglected neighbourhood characteristics such as litter, poor maintenance, and crime. Therefore the external validity of this study can be inferred to apply to other multicultural urban youth in Canada.

Another potential limitation to this study may be caused by the convenience sampling method used. All of the participants are friends with the three core group members (interns) and with many of each other; therefore their opinions and experiences may be more similar to one another and may not be representative of the multicultural youth population in general. However, to achieve a more representative sample, we had hired interns from different ethno-racial groups and ages and selected participants who were ethno-racially and religiously diverse in order to represent the ethnic distribution within the neighbourhood.

Finally, this project period took place during a city-wide garbage strike which greatly affected the media's and the public's garbage awareness. From our previous research we have already established that SJT residents are very concerned with garbage issues in their neighbourhood, however it is difficult to tell how the strike affected the youths' choices of subject matter for this project.

References

Abada, T., Hou, F., & Ram, B. (2007). Racially mixed neighbourhoods, perceived neighbourhood social cohesion, and adolescent health in Canada. *Social Science & Medicine*, 65(10), 2004-2017.

Addy, C. L., Wilson, D. K., Kirtland, K. A., Ainsworth, B. E., Sharpe, P., & Kimsey, D. (2004). Associations of perceived social and physical environmental supports with physical activity and walking behavior. *Am J Public Health*, 94(3), 440-443.

Ahmed, Z. S. (2005). Poverty, Family Stress & Parenting.

Babey, S. H., Hastert, T. A., Yu, H., & Brown, E. R. (2008). Physical activity among adolescents. When do parks matter? *Am J Prev Med,* 34(4), 345-348.

Baum, F. E., Ziersch, A. M., Zhang, G., & Osborne, K. (2009). Do perceived neighbourhood cohesion and safety contribute to neighbourhood differences in health? *Health Place*, 15(4), 925-934.

Bayley, B. K., & Anderson, J. D. (2006). Fear of Crime Among Urban American Youth. *Journal of Family and Consumer Sciences*, 98(2), 26-32.

Beiser, M., Hou, F., Hyman, I., & Tousignant, M. (1998). Growing Up Canadian – A Study of New Immigrant Children. The Working Paper Series. *Hull: Applied Research Branch of Strategic Policy*.

Borris, S. (2004). Cited in the report "A billion voices: listening and responding to the health needs of slum dwellers and informal settlers in new urban settings." Healthier peole in healthier environments. *WHO Kobe Centre*, Japan 2005. Paper presented at the Governance, Micro-governance and Health Conference on SARS and the Global Governance of Public Health, Temple University Beasley School of Law, Philadelphia PA, USA.

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.

Cairney, T. H. (2005). Literacy Diversity: Understanding and Responding to the Textual Tapestries of Home, School, and Community.: Mahwah, NJ, US: *Lawrence Erlbaum Associates Publishers*.

Carter, T. (2005). The Influence of Immigration on Global City Housing Markets: The Canadian perspective. *Urban Policy and Research*, 23(3), 265-286.

Cattell, V., Dines, N., Gesler, W., & Curtis, S. (2008). Mingling, observing, and lingering: Everyday public spaces and their implications for well-being and social relations. *Health & Place*, 14, 544-561.

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. (2006). Improving the Health of Canadians: An introduction to health in urban places Canadian Population Health Initiative. Ottawa: *Canadian Institute for Health Information*.

Coen, S. E., & Ross, N. A. (2006). Exploring the material basis for health: characteristics of parks in Montreal neighborhoods with contrasting health outcomes. *Health Place*, 12(4), 361-371.

Cohen, D. A., Ashwood, J. S., Scott, M. M., Overton, A., Evenson, K. R., Staten, L. K., et al. (2006). Public parks and physical activity among adolescent girls. Pediatrics, 118(5), e1381-1389.

Cradock, A. L., Kawachi, I., Colditz, G. A., Gortmaker, S. L., & Buka, S. L. (2009). Neighborhood social cohesion and youth participation in physical activity in Chicago. *Social Science & Medicine*, 68, 427–435.

CSDH. (2008). Closing the gap in a generation: health equity through action on the social determinants of health. Final Report of the Commision on Social Determinants of Health. Geneva: *World Health Organization*.

Desai, S., & Subramanian, S. (2000). Colour, Culture and Dual Consciousness: Issues identified by South Asian immigrant youth in the Greater Toronto Area. Toronto: *The Council of Agencies Serving South Asians; The South Asian Women's Centre*.

Ellaway, A., Macintyre, S., & Kearns, A. (2001). Perceptions of Place and Health in Socially Contrasting Neighbourhoods. *Urban Studies*, 38(12), 2299-2316.

Erikson, E. H. (1968). [The ontogenesis of ritualization]. *Psyche* (Stuttg), 22(7), 481-502.

Friedman, H. L. (1993). Adolescent Social Development: A Global Perspective. Implications for Health Promotion Across Cultures. *Journal of Adolescent Health*, 14, 588-594.

Gagné, L. G., & Ferrer, A. (2006). Housing, Neighbourhoods and Development Outcomes of Children in Canada. *Canadian Public Policy*, 32(3), 275-300.

Gilliland, J., Holmes, M., Irwin, J. D., & Tucker, P. (2006). Environmental equity is child's play: mapping public provision of recreation opportunities in urban neighbourhoods'. *Vulnerable Children and Youth Studies*, 1(3), 256-268.

Goodman, E., Slap, G., & Huang, B. (2002). How much does socioeconomic status matter to adolescent health? *Journal of Adolescent Health* Vol. 30(2), 102.

Grow, H. M., Saelens, B. E., Kerr, J., Durant, N. H., Norman, G. J., & Sallis, J. F. (2008). Where are youth active? Roles of proximity, active transport, and built environment. *Med Sci Sports Exerc*, 40(12), 2071-2079.

Hanson, R. F., Borntrager, C., Self-Brown, S., Kilpatrick, D. G., Saunders, B. E., Resnick, H. S., et al. (2008). Relations among gender, violence exposure, and mental health: the national survey of adolescents. Am J Orthopsychiatry, 78(3), 313-321.

Haque, N., & Eng, B. (2011). Tackling inequity through a Photovoice project on the social determinants of health. *Global Health Promotion*, 18(1), 16-19.

Health Canada (2010). Migration Health: Embracing a Determinants of Health Approach. *Health Policy Research Bulletin*. December, 2010.

Health Disparities Task Group. (2004). Reducing Health Disparities - Roles of the Health Sector: Discussion Paper (pp. 31). Retrieved from http://www.phac-aspc.gc.ca/ph-sp/disparities/ddp-eng.php

Heslop, C. L., Miller, G. E., & Hill, J. S. (2009). Neighbourhood socioeconomics status predicts non-cardiovascular mortality in cardiac patients with access to universal health care. *PLoS One*, 4(1), e4120.

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.

Jackson, J., & Stafford, M. (2009). Public Health and Fear of Crime: A Prospective Cohort Study *The British Journal of Criminology* [London], 49(6).

Kazemipur, A., & Halli, S. (2000). The Invisible Barrier: Neighbourhood poverty and integration of immigrants in Canada. *Journal of International Migration and Integration*, 1(1), 85-100.

Khanlou, N., Beiser, M., Cole, E., Freire, M., Hyman, I., & Kilbride, K. M. (2002). Mental Health Promotion Among Newcomer Female Youth: Post-migration experiences and self-esteem. Ottawa: *Status of Women Canada*.

Kingston, B., Huizinga, D., & S., E. D. (2009). A Test of Social Disorganization Theory in High-Risk Urban Neighbourhoods. *Youth & Society*, 41(1), 53-79.

Kunz, J., & Hanvey, L. (2000). Immigrant Youth in Canada (pp. 30). Ottawa: C*anadian Council on Social Development*.

Ng, E., Wilkins, R., Gendron, F., & Berthelot, J.-M. (2005). Dynamics of Immigrants' Health: Evidence from Canada, 1994-95 to 2002-03. Summary Report. *Canadian Studies in Population*, 32(1), 131-133.

Oliver, L. N., & Hayes, M. V. (2008). Effects of neighbourhood income on reported body mass index: an eight year longitudinal study of Canadian children. *BMC Public Health*, 8(16).

Panter, J. R., Jones, A. P., & van Sluijs, E. M. (2008). Environmental determinants of active travel in youth: a review and framework for future research. *Int J Behav Nutr Phys Act*, 5, 34.

Pickett, K. E., & Wilkinson, R. G. (2008). People like us: Ethnic group density effects on health. *Ethnicity & Health*, 13(4), 321-334.

Raphael, D. (2007). The Social Determinants of Newcomers to Canada's Health: Storm clouds on the horizon. Paper presented at the 9th National Metropolis Conference: Exploring Canada's Diversity, Today and Tomorrow, Toronto.

Renalds, A., Smith, T. H., & Hale, P. J. (2010). A systematic review of built environment and health. *Fam Community Health*, 33(1), 68-78.

Sampson, R. J., Raudenbush, S. W., & Earls, F. (1997). Neighborhoods and violent crime: a multilevel study of collective efficacy. *Science*, 277(5328), 918-924.

Schmitt-Rodermund, E., & Vondracek, F. W. (1999). Breadth of Interests, Exploration, and Identity Development in Adolescence. *Journal of Vocational Behavior*, 55, 98–317.

Seat, R. (2000). Factors Affecting the Settlement and Adaptation Process of Canadian Adolescent Newcomers 16-19 Years of Age. Toronto.

Seeland, K., Sabine, D., & Hansmann, R. (2009). Making friends in Zurich's urban forests and parks: The role of public green space for social inclusion of youths from different cultures. *Forest Policy and Economics*, 11(1), 10-17.

Simoes, C., Batista-Foguet, J. M., Matos, M. G., & Calmeiro, L. (2008). Alcohol use and abuse in adolescence: proposal of an alternative analysis. *Child Care Health Dev*, 34(3), 291-301.

Sjöberg, L., Holm, L.-E., Ullén, H., & Brandberg, Y. (2004). Tanning and risk perception in adolescents. *Health, Risk & Society*, 6(1), 81-94.

Statistics Canada. (2001). Census Tract 0065.00 (CT) 2001 Census.

Statistics Canada. (2008a). Immigrant Trends in Canada. Retrieved from http://www12.statcan.ca/census-recensement/2006/ref/info/immigration-eng.cfm

Statistics Canada. (2008b). Population Growth in Canada. Retrieved from http://www.statcan.gc.ca/pub/91-003-x/2007001/4129907-eng.htm

Statistics Canada. (2009a). 2006 Census: Immigration in Canada: A portrait of the foreign-born population, 2006 Census: Highlights. Retrieved from http://www12.statcan.ca/census-recensement/2006/as-sa/97-557/p1-eng.cfm

Statistics Canada. (2009b). Children and Youth. Retrieved from http://www41.statcan.gc.ca/2008/20000/ceb20000_000-eng.htm

Statistics Canada. (2009c). The Report at a glance: Population growth and age structure. Retrieved from http://www.statcan.gc.ca/pub/91-209-x/2004000/rprt-eng.htm

Statsitics Canada. (2006). Census Tract Profile for 0065.00 (CT), Toronto (CMA) and Ontario Census 2006.

Tolan, P., & Grant, K. (2009). How social and cultural contexts shape the development of coping: Youth in the inner city as an example. In E. A. Skinner & M. J. Zimmer-Gembeck (Eds.), *Coping and the development of regulation. New Directions for Child and Adolescent Development* (Vol. 124, pp. 61–74). San Francisco: Jossey-Bass.

Vo-Jutabha, E. D., Dinh, K. T., McHale, J. P., & Valsiner, J. (2009). A Qualitative Analysis of Vietnamese Adolescent Identity Exploration Within and Outside an Ethnic Enclave. *J Youth Adolescence*, 38, 672–690.

Wang, C. (1999). Photovoice: A participatory action research strategy applied to women's health. *Journal of Women's Health*, 8(2).

Wang, C. (2006). Youth Participation in Photovoice as a Strategy for Community Change. *Journal of Community Practice*, 14(1-2), 147-161.

Wang, C., Cash, J., & Powers, L. (2000). Who Knows the Streets as Well as the Homeless? Promoting Personal and Community Action through Photovoice. *Health Promotion Practice*, 1(1), 81-89.

Wang, C., Morrel-Samuels, S., Hutchison, P., Bell, L., & Pestronk, R. M. (2004). Flint photovoice: Community-building among youth, adults, and policy makers. *American Journal of Public Health*, 94(6), 911-913.

Wang, C., & Redwood-Jones, Y. A. (2001). Photovoice Ethics: Perspectives From Flint Photovoice. *Health Education & Behavior*, 28(5), 560-572.

Widome, R., Sieving, R. E., Harpin, S. A., & Hearst, M. O. (2008). Measuring Neighborhood Connection and the Association with Violence in Young Adolescents. *Journal of Adolescent Health*, 43, 482-489.

Williams, J. S., Singh, B. K., & Singh, B. B. (1994). Urban youth, fear of crime, and resulting defensive actions. *Adolescence*, 29(114), 323-330.

Wolch, J. R. (2005). Residential Location of the Service-Dependent Poor. *Annals of the Association of American Geographers*, 70(3), 330-341.

World Health Organization. (1948). 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.

Zine, J. (2008). Honour and Identity: An Ethnographic Account of Muslim Girls in a Canadian Islamic School. *TOPIA*, 19, 35-62.

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