

Healthcare for All: A Background Paper

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Executive Summary

Undocumented migrants are among the thousands of foreign-born Canadian residents who contribute to—and sustain—Canadian society and the Canadian economy, including those whose labours have been deemed essential during the COVID-19 pandemic. Oftentimes undocumented migrants are ‘created’ when after legally entering the country as temporary foreign workers (TFWs), their work permits cannot be renewed leaving them with the option of either returning with few funds or continuing to earn for their families while running the risk of deportation. Given the precarity of their migration status and their lives in Canada, undocumented migrants try to minimize contact with authorities who represent the nation-state, including health services. Moreover, they are required to pay for services, which most can ill-afford. A small number of clinics and individual practitioners may offer free health care; however, they also have limited resources and may not be able to treat complex conditions or those requiring follow-up care. Resultantly, they report a high number of unmet health needs, despite elevated risk of occupational injuries, stress, and noxious social and physical environmental exposures. Thus, though legally entitled to healthcare, for most undocumented migrants these rights remain only theoretical as in reality they face fear of deportation, loss of job and income, and financial barriers.

What can be learned about the access of undocumented migrants to healthcare? Currently, Thailand and Spain are the only two countries in the world that offer the same healthcare access to undocumented migrants as citizens. While most European countries offer emergency services for undocumented migrants, France, the Netherlands, Portugal, Spain, and Switzerland also allow undocumented migrants to access similar services to citizens if they meet conditions including proof of identity and length of residence in the country. Some European cities such as Ghent, Frankfurt, and Dusseldorf, offer barrier-free healthcare for undocumented migrants and throughout the USA, Federally Qualified Health Centers support care to the uninsured regardless of immigration status. In Canada, Ontario and Quebec, provide a base level of healthcare access to undocumented immigrants, and a small number of stand-alone community-based clinics offer additional care and specialized services.

To promote healthcare for undocumented migrants in Alberta, we offer some preliminary calls to action based on the findings in this report:

1. Support barrier-free access to vaccination, COVID-19 treatment, and proof of vaccinations;
2. Expand barrier-free healthcare services, including for pregnancy and conditions requiring tertiary care;
3. Remove waiting periods and provide universal healthcare coverage for all residents of Canada regardless of status;
4. Support community-based migrant-responsive healthcare; and
5. Grant workers permanent residency status upon arrival.

Introduction

An estimated 10% to 15% of migrants world-wide are undocumented (Alcaraz, et al., 2021). Primarily subsumed under the category of temporary foreign workers (TFWs), undocumented migrants are among the thousands of foreign-born Canadian residents who contribute to—and sustain—Canadian society and the Canadian economy, including those whose labours have been deemed essential during the COVID-19 pandemic. Although the exact numbers of undocumented migrants in Canada is difficult to ascertain, as of 2016, over 500,000 undocumented migrants lived in Ontario alone, and those numbers are thought to have increased in the intervening years (Bains, 2021). Employers in Alberta are believed to be “among the most enthusiastic users of temporary foreign workers” in the country (Foster & Barnettson, 2017, p. 27), suggesting that a considerable number of undocumented migrants reside in the Province.

The term undocumented refers to individuals who do not possess the state-sponsored authorization to reside or work in the confines of the nation-state. Undocumented status is often a fluid condition that migrants may move into and/or out of, and which is characterized by “the authorized and unauthorized forms of non-citizenship that are institutionally produced and [that] share a precarity rooted in the conditionality of presence and access” (Goldring & Landholt, 2013, p. 3). As Alcaraz, et al. (2021) describe, oftentimes undocumented migrants are ‘created’ when their work permits cannot be renewed leaving them with the option of either returning with few funds or continuing to earn for their families while running the risk of deportation. Given the precarity of their migration status and their lives in Canada, undocumented migrants try to minimize contact with authorities who represent the nation-state, including health services. Resultantly, they report a high number of unmet health needs, despite elevated risk of occupational injuries, stress, and noxious social and physical environmental exposures (Alcaraz, et al. 2021; Ridde, et al., 2020).

The Canadian Charter of Rights and Freedoms affirms that all persons regardless of citizenship status are entitled to “life, liberty, and security of person” and “the right to human dignity, respect, equality and justice” (Alcaraz, et al., 2021, p. 9). These tenets underpin calls for healthcare for all, including undocumented migrants. The primary objective of this report is summarize evidence in support of this claim with a view towards improving healthcare access for undocumented workers in Alberta.

After describing our methods of data collection and analysis, we offer a detailed overview of TFWs’ contributions to the Canadian labour market and economy as the context in which undocumented migrants are situated. Next, we highlight various international policies and programs implemented to facilitate undocumented workers’ access to healthcare and follow with a description of the situation in Alberta. We then widen our lens to examine models of service delivery and policies found across Canada that could be adopted in the Province. We conclude with recommendations for further actions.

Methods and Authors' Roles

This report was produced collaboratively. After producing an outline of topics to be covered, pairs and individuals volunteered to search for and synthesize relevant scholarly and popular literature, sharing their drafts with colleagues for their input. Spitzer brought the efforts together, edited the contributions for coherence of style, and wrote the introduction and conclusion. The search strategies and sources uncovered are detailed here.

The literature review opens with an environmental scan of the academic and grey literature that establishes how temporary foreign workers (TFWs) contribute to Canada's nation building. Sanchez conducted a literature search between April to May 2021 using University of Alberta's Academic Search and EBSCO data bases as well as Google Scholar, deploying the mesh terms "temporary foreign workers," "economic contributions," "Alberta," and "Canada." The search was limited to an 11-year period from 2011- 2021. The combined search attempts generated a total of 112 publications of which only 12 were preselected for initial screening. The in-depth reading of these materials cross referenced with cited works eventually led to a total of 31 articles that were read, analyzed and subject to thematic analysis. These data were triangulated with data from government websites, primarily Statistics Canada.

Nyarko and Mainali focused on finding policy solutions to address the lack of healthcare for undocumented migrants in Alberta. A preliminary search was performed on Google to identify key papers related to the topic, using the initial search string: "countries that provide healthcare for undocumented migrants." This strategy produced several results that were evaluated for relevance and applicability. Subsequently, they investigated "Connected Papers," a visual search tool that identifies papers similar to one found relevant. In addition, they searched Scopus, PubMed, and PAIS International databases using the search strings "(policy) AND (healthcare) AND (undocumented or uninsured) AND (immigrant* or migrant*)." Specific websites were also examined using the search string "(policy) AND (healthcare) AND (undocumented) AND (immigrant*)." These websites included: www.canada.ca, www.commonwealthfund.org, www.policyalternatives.ca, and www.who.int. The search results ranged from papers published in 2003 to 2021 and produced 138 results that were subject to a preliminary scan of the abstracts to determine relevance using the inclusion criteria: sources from any country, sources from any province or state, sources in English, and any type of source (i.e., peer-reviewed document, government report, etc.), and exclusion criteria: sources from 2010 or earlier, sources about documented migrants, sources about health status of migrants, sources that did not focus on healthcare for uninsured migrants, and sources that did not speak about policy options. Resultantly, Nyarko and Mainali read, analyzed, and summarized 35 sources, the results of which were shared with the research team.

Džunić and Surti focused on access to healthcare for undocumented migrant workers in Alberta, engaging in a search of the databases PubMed, OVID and Scopus. A total of 36 articles were found, of which 11 were deemed within the scope of this literature review, following textual evaluation. The search terms "medically uninsured", "migrants", "immigrants", "healthcare

access”, “access to health services”, “migrant worker”, “uninsured”, “undocumented”, “illegal”, “barrier” and “Alberta” were utilized. Additionally, given the minimal evidence on Alberta-based studies, several news articles were uncovered in the grey literature. The report “In the Shadows” published by Migrante Alberta was also an important resource in providing context and understanding the lived experiences of migrant workers in Alberta.

To uncover examples of access to healthcare by undocumented migrants, Mangat and Mulji conducted a comprehensive search of PubMed, EMBASE, Cumulative Index of Nursing and Allied Health Literature (CINAHL), and Google Scholar, using the included search terms “undocumented”, “migrants”, “healthcare access”, “refugee”, and “immigrants”. English language restrictions were applied. No restrictions for publication type and period were applied. Their search yielded 157 studies of which 23 met their search criteria. After full text revision, 11 studies were included in their synthesis.

Environmental Scan: Thematic Insights

Research that specifically focuses on migrant workers' contribution to Canadian nation-building remains scant. Most literature pertaining to TFWs, which tangentially references their roles in the Canadian economy and society, focuses on topics including: Identifying the determinants of temporary foreign workers' migration decisions, describing foreign workers' lived experiences with racism and capitalists' labour exploitation, illustrating TFW's struggles for work and status mobility, highlighting COVID-19 as a litmus paper to Canadian labour, migration, economic policies, and drawing attention to foreign workers' optimism and activism amidst blockages to their claims for permanence and rights to human dignity. Overall, what ties these works together is the acknowledgement of the various forms or systems of oppression embedded in the Canadian migration and labour regimes, and the necessity for advocacy and policy work that will advance migrant workers' rights to citizenship, predicated not only on Canada's indebtedness to the sweat and blood of non-Canadian workers, but also on its moral responsibility to act its claim as a place of safe refuge and a land of equal opportunity for all (UFCW Canada and the Agriculture Workers Alliance, 2020).

It is not within the scope of this section to include an in-depth interrogation of Canada's migration and labour policies, but the succeeding section will focus on re-articulating the socio-economic benefits Canada accrues from the presence, labour, and engagement of temporary foreign workers in this country's multiple frontiers. When available, particular attention to the case of Alberta is provided. Overall, the literature suggests that TFWs benefit Canada by:

1. Supplying human resources for different sectors and industries;
2. Providing essential services in the time of the pandemic;
3. Contributing quantifiable resources and other enabling mechanisms for Canada's socio-economy; and
4. Enriching national and transboundary discourses on migration, citizenship, and development.

Provision of human resources in different sectors and industries: The participation of TFWs in the Canadian labour market has grown exponentially in the past years, suggesting the heightened reliance of the nation on non-Canadians as human resources for an array of employment categories. TFWs are primarily issued work permits under either the TFW program or the International Mobility Program (IMP). According to Lu & Hou (2019), the goal of the TFWP is to fill short-term labour shortages, while the IMP aims to advance Canada's broad economic and cultural interests. Furthermore, while TFWP participants hold employer-specific work permits (ESWP), restricting them to particular employers who could not find suitable Canadian workers, most IMP participants are issued open work permits (OWP) allowing them to work for any employer willing to hire them. The skills level differentiation that come with these two permits ensures that ESWP holders "inhabit[s] social and political categories that carry ideological weight

and institutional logic, which in turn generate specific administrative practices that subjugate them in Canada” (Abboud, 2013; p.134). In particular, being tied to a single employer leads them to life of indentured labour because they are not free to circulate in the labour market (Migrante Alberta, 2016).

As various studies now suggest, “[C]losed work permits, coupled with inadequate monitoring and enforcement of labour standards, create the conditions that allow unscrupulous employers and recruiters to abuse...(TFWs) with impunity. Closed work permits facilitate employer control and exploitation of workers including working excessive hours without payment for overtime, unpaid hours of work and often less than minimum wage pay” (Migrante Alberta, 2016, para.8). There is also a growing body of knowledge that illustrates how closed work permit and the two-tiered process of permanent residency in Canada (from TFWP to Provincial Nominee Program) become instrumentalities in forcing ESWP holders to be docile bodies as they are not only pushed into indenture-ship, but also impelled to be silent about their experiences of abuse because of their employers’ power to facilitate or bar their way into citizenship gateways (Torres, et al, 2012; Tungohan, 2018).

Brown-McLaughlin (2020) refers to the above processes as “the precarity trap”. First introduced by Standing in 2011, the term illustrates how migration programs and labour policies systematically induce conditions and entrap TFWs in a mesh of labour exploitation, indecent living conditions, social isolation, and mental stress. Canada’s multiple iteration of its TFWP does not exist in a national vacuum, instead it exists and operates as a manifestation of global neoliberalism and capitalist exploitation of unfree labour. Canada intentionally uses TFWs “to create a pool of legally free or coerced labour by systematically denying participants’ access to citizenship” (Brown-McLaughlin, 2020, p.2). This in turn produces predominantly racialized non-citizens or denizens of foreigners with residency rights to work, but who are denied full citizen rights. TFWs are therefore deemed ‘good enough to work’, but not to stay in Canada because gate-keeping policies are well placed to keep TFWs out of spaces for citizenship rights.

The Government of Canada (2021) has declared that: “The success and continued growth of the Canadian economy depends on a number of factors, including the contributions of temporary foreign workers” (para.6). The Seasonal Agricultural Workers Program (SAWP), the Caregiver Program (CP), and the Low-Skilled/Low-Wage Program (LS/LWP) are the common streams through which TFWs, especially from the Global South, enter Canada. Notably the importation of migrant labour is well-entrenched in Canadian history. The SAWP is now on its 52nd year and the LS/LWP has remained in high demand in some form since the late 1880s when Chinese railroad workers first arrived in Canada (MWAC, 2019) and various iterations of the CP have been in existence since the 19th century (Spitzer & Torres, 2008). This historical and ongoing reliance of Canada on migrant labour grounds the assertion of many migrant workers’ collectives, advocacy groups, and critical scholars that migrant workers’ roles in this nation is neither temporary nor easily discountable (MWAC, 2019; Spitzer, 2020). Non-status/non-citizen workers are not peripheral as the whole nation functions through the extensive contributions of foreign workers

especially in jobs characterized by low-wage, difficult working conditions, and overall precarity—work that is often shunned by most Canadians (Brown-McLaughlin, 2020; Foster & Luciano, 2020; MWAC, 2019).

A review of the latest Statistics Canada data (Lou & Hou, 2019) demonstrates that from 2000 to 2020, the numbers of TFW work permit holders surged from 22,480 to 76,995—a percentage increase of 242.5% over two decades. IMP work permit holders for the same period showed a more staggering increase of over 1,000% as numbers rose from 44,145 to 458,760. Figure 1 below shows that when all types of work permit for temporary workers issued from 2001 to 2016 are counted, the overall numbers increased by 163% (from 232,600 to 613,200). OWP permits released annually have soared from 87,000 to 377,700, a percentage increase of 334.138%; while high-skilled ESWP holders and low-skilled ESWP holders increased by 27.37% (from 106,700 to 135,900) and 126.16% (from 34,400 to 77,800) respectively for the same period.

Figure 1:
Number of TFWs by Work Permit, 2001 to 2016

	2001	2003	2005	2007	2009	2011	2013	2014	2015	2016
	number									
Total	232,600	255,400	294,300	375,300	496,700	560,600	649,700	644,500	602,800	613,200
OWP holders	87,000	124,700	145,700	176,900	244,200	309,500	363,600	358,000	342,400	377,700
Post-graduation work permit	2,400	3,400	7,400	11,500	24,300	43,600	69,000	82,500	91,700	117,700
International Experience Canada	19,200	26,000	39,400	49,000	69,400	90,500	93,800	86,700	85,600	90,800
For permanent residence purpose	16,900	18,600	16,800	14,300	14,500	21,500	17,600	19,400	27,500	35,000
For study purpose	3,900	4,900	8,400	28,100	36,300	54,200	75,600	68,000	56,200	57,600
Humanitarian and compassionate	40,500	60,400	56,600	51,700	71,200	65,900	55,300	46,100	30,200	25,700
Spouses of skilled workers/students	2,200	8,900	14,600	20,400	26,200	29,900	39,400	42,600	43,200	47,200
Other OWP programs	1,700	2,600	2,500	1,900	2,300	3,900	12,800	12,700	8,100	3,700
High-skill ESWP holders	106,700	86,600	93,700	112,400	130,800	137,100	158,300	157,400	146,500	135,900
Low-skill ESWP holders	34,400	39,800	49,000	74,800	105,000	86,900	92,000	99,300	90,700	77,800
Other types ¹	4,500	4,300	5,900	11,200	16,700	27,100	35,800	29,800	23,200	21,800

Source: Lu & Hou (2019)

The Alberta Provincial data from Statistics Canada on TFWP from 2000–2020 (Annex 2) indicates that TFW permit holders have increased by 193.10%. Although these numbers have declined steadily since 2014, the Province remains host to around 10,200 foreign workers as of second quarter of the current year. This number is 13% of the national total, and the fourth largest among all provinces. Meanwhile, as of 2020, around 25,255 out of 485,760 or 5.19% of overall IMP work permit holders in Canada designate Alberta as their intended destination (Annex 3). According to statistics of IMP work permit holders that became effective in the current year (Annex 4), another 9,905 work permits have been issued.

Despite the growing number of TFWs in Canada, they constitute only about 3% of the national employment as of 2017 records (Lu, 2020). The overall percentage seems meagre, but as Figure 2 demonstrates, TFWs comprise a key human resource in different Canadian industries, notably in the agriculture, forestry, fishing, and hunting (15.5%), accommodation and food services (7.2%), administrative and support services, waste management and remediation services (5.8%),

professional, scientific, and technical services (3.8%) and arts, entertainment, recreation, information and cultural industries (3.8%).

Figure 2:
TFWs labour contributions in Different North American Industries

Subsector, NAICS code	percent
Crop production	27.4
Private households	9.8
Gasoline stations	8.0
Accommodation and food services	7.2
Animal production and aquaculture	5.6
Amusement, gambling and recreation	4.5
Warehousing and storage	4.3
Arts, entertainment and recreation	4.2
Clothing and clothing accessories stores	4.2
Food manufacturing	3.4
OVERALL	2.9
Note: NAICS = North American Industry Classification System.	

Source: *Lu (2020)*

In addition, around 10% of all Canadian firms have at least one TFW and 3.6% have at least 30% of their annual workforce composed of foreign workers (Lu, 2020). Notably, 17% of all employers in private household services, 10% of all firms in crop production, gasoline stations, and food services and drinking establishments, 6.6% of food and beverage stores, 5.2% of real estate companies, 4.3% of businesses in accommodation services, and 4.2% of food manufacturing firms have one third or more of their annual workforce comprised of TFWs (Lu, 2020).

Providing essential services in the time of the pandemic: The current COVID-19 pandemic exacerbates existing health and social inequities while at the same time sharply focusing on the essential roles of TFWs in Canada’s economy and its citizens’ wellbeing. Public Safety Canada (2021) has developed a set of functions and identified ten sectors as essential in the context of the COVID-19 pandemic “to help provinces/territories, Indigenous communities, and municipalities protect their communities while maintaining the reliable operation of critical infrastructure services and functions to ensure the health, safety, and economic well-being of the population” (para. 3). These sectors include energy and utilities, information and communication technologies, finance, health, food, water, transportation, safety, government, and manufacturing. Figure 2 highlights TFWs’ key contributions in ensuring food security as more than a quarter of all crop production (27.4%) in Canada relies on the skills and labour of non-Canadian workforce (Lu, 2020).

Figures 3A & B:
Jobs filled by TFWs in Agricultural Farms

	Farms with at least one TFW	Jobs filled by TFW	Share of jobs filled by TFW among jobs of all employees ¹
	number		percent
All farm types	3,846	54,734	19.5
Cattle ranching and farming, including dairy	501	1,548	3.2
Hog and pig farming	134	496	5.3
Poultry and egg production	83	446	3.6
Other/mixed animal production	133	784	5.5
Oilseed and grain farming	220	1,089	2.1
Vegetable and melon farming	693	13,210	39.8
Fruit and tree nut farming	1,021	14,848	36.9
Greenhouse, nursery and floriculture production	679	18,389	35.0
Other/mixed crop farming	382	3,924	20.7

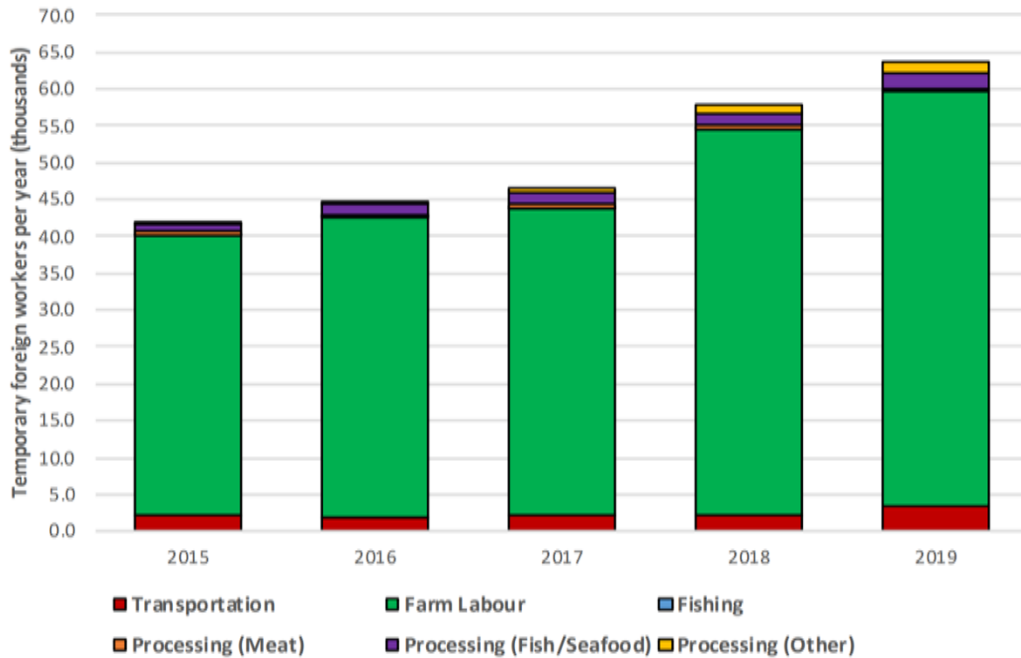
	Farms with at least one TFWs	Jobs filled by TFWs	Share of jobs filled by TFWs among jobs of all employees ¹
	number		percent
Canada	3,846	54,734	19.5
Newfoundland and Labrador	7	34	2.8
Prince Edward Island	35	285	6.7
Nova Scotia	73	1,566	19.7
New Brunswick	15	145	2.3
Quebec	1,259	14,653	26.2
Ontario	1,328	25,611	31.2
Manitoba	67	579	3.1
Saskatchewan	103	447	1.7
Alberta	252	1,900	5.7
British Columbia	707	9,514	21.4

Source: Statistics Canada, 2020

Cedillo, Lippel, & Nakache (2019) argue that the integral role of temporary foreign migrant workers cannot be over-emphasized, especially when Canadians are so unwilling to take up the precarious labour that has become the domain of migrant workers. Agonsi (2021) adds that while on the labour supply side, low salaries are a common reason for Canadians' disinterest in some jobs, on the demand side, employers also argue that: "Canadians are not reliable and [not as] easy to train when compared to foreign workers" (p.5). Agricultural labour, especially in fruit, vegetable, and greenhouse production as well as in agri-food packaging and distribution are among these precarious jobs that without workers, Canadians will be left food insecure, in the time of pandemic or otherwise.

As presented in *Figures 3A and B*, in close to 4,000 farms in Canada one in five workers are TFWs. While provinces and agricultural sub-sectors have varying and changing degrees of reliance on TFWs, Figure 4 demonstrates that TFWs remain indispensable in cultivating, tending, and harvesting plant-based agriculture and meat products as well in providing labour for food processing as well as transporting agricultural commodities by truck, sea and other forms of transportation.

Figure 4:
TFWs in Agricultural Production and Transportation, 2015-2019



Source: *Falconer, 2020*

Figure 4 combines TFWs' participation in the primary (production) and secondary (processing and distribution) agriculture as *Falconer (2020)* reports that they constitute close to 64,000 or 20% of the overall labour force of the industry in 2019. TFWs account for more than 60% of all foreign workers entering Canada under the TFWP (*Minister of Agriculture and Agri-Food, 2020*) and prior to the pandemic's labour and travel restrictions, almost one in every five agricultural workers in Canada already came from overseas. The vast majority of TFWs are farm labourers (88%) engaged in cultivating, tending, and harvesting plant-based agriculture and meat products; while about 7% are in the food processing, mostly providing labour in meat, poultry, and seafood-processing plants, and 5% are working in transporting agricultural commodities by truck, sea, and other forms of transportation. Indeed, as many scholars, advocates, and foreign workers emphasize, foods in Canada are produced locally, but are more and more harvested, processed, and transported transnationally. If the pandemic has brought at least another fact aside from healthy inequity, it is the reality that it is migrant hands that feed Canada.

Figure 5:
TFW participation in Primary Agricultural Sector Overtime

Primary Agriculture Sector	2016 (TFWs)	2018 (TFWs)	2016 (Local)	2018 (Local)	2016 Ratio	2018 Ratio	TFW % Change
Cattle and ranch farming	1,179	1,548	43,838	44,896	3%	3%	31%
Hog and pig farming	625	496	9,898	10,244	6%	5%	-21%
Poultry and egg production	365	446	14,416	15,531	2%	3%	22%
Other animal production	806	784	9,168	10,250	8%	7%	-3%
Oilseed and grain farming	1,395	1,089	42,059	44,164	3%	2%	-22%
Vegetable and melon farming	12,707	13,210	22,928	20,606	36%	39%	4%
Fruit and tree-nut farming	12,609	14,848	17,292	16,143	42%	48%	18%
Greenhouse, nursery and floriculture	15,426	18,389	44,015	38,492	26%	32%	19%
Other crop farming	3,473	3,924	13,598	13,719	20%	22%	13%
Total animal production	2,975	3,274	77,320	80,921	4%	4%	10%
Total plant production	45,610	51,460	139,892	133,124	25%	28%	13%
Total production	48,585	54,734	217,212	214,045	18%	20%	13%

Source: Falconer, 2020

Canada's reliance on temporary agricultural workers is growing. In the primary agriculture, a cumulative increase of 13% in TFW labour participation between 2016-2018 was observed, although certain subsectors indicated a decrease in TFW employment as shown in Figure 5. It is important to highlight that while TFW's role in the industry is often emphasized in crop production, their participation in cattle and ranch farming and poultry and egg production has also been expanding. From 2016 to 2018 alone, the number of foreign workers in these works increased by 31% and 22% respectively.

Focusing on Alberta, close to 5% of all foreign agricultural workers in Canada as of 2019 are in the Province. As indicated in Figure 6, 17.7% of all TFWs in crop, meat and fishery transport are in Alberta, making the Province rank second to British Columbia (39.8%) in terms of employing foreign nationals in moving agricultural products from farms towards consumers. Moreover, Alberta is the top beneficiary of foreign labour in meat processing as it hosts 50.1% of all TFWs in this subsector.

Figure 6:
TFW Participation in Agriculture by Provincial Distribution 2019

Province/ Industry	Transportation	Farm Labour	Fishing	Processing (Meat)	Processing (Seafood)	Processing (Other)	Total
NL	3.3	0.1	--	0.2	2.8	0.0	0.4
PE	2.4	0.7	--	0.2	25.3	0.0	1.6
NS	3.6	2.6	--	0.2	16.8	0.3	3.0
NB	6.6	0.4	--	1.9	48.3	0.0	2.3
QC	13.7	27.3	--	9.3	5.7	58.9	26.5
ON	6.1	42.6	--	28.8	0.0	34.6	38.9
MB	5.6	1.2	--	0.0	0.0	0.1	1.4
SK	1.1	0.9	--	0.2	0.0	0.0	0.8
AB	17.7	3.9	--	50.1	0.0	1.1	4.9
BC	39.8	20.3	100.0	9.3	1.0	5.0	20.3

Source: Falconer, 2020

Foster and Luciano (2021) note that the province has long been the centre of Canada's meatpacking industry, with the industrial plants in High River and Brooks that were controversial due to Covid outbreak, producing 70% of all Canada's beef products. The fully integrated slaughter and processing facility in High River alone supplies 50% of all beef in Western Canada and all ground meat for McDonald's chain of fastfood restaurants nationwide (Keller & Dobby, 2020).

In addition to working in the agricultural sector to keep plant and meat products produced, processed, and transported (Falconer, 2020; Migrant Workers' Alliance, 2020; Laundry et al. 2021), TFWs also play key roles in the service producing sector to support Canadians' security and wellbeing amidst the ongoing and unfolding effects of COVID-19. Figure 2 indicates that TFWs constitute a significant portion of workers in accommodation and food (7.2%), administrative and support (5.8%), and waste management and remediation (3.8%). Temporary foreign workers also contribute a percentage of human resources in the transportation and warehousing (1.7%), finance and insurance (1.6%), healthcare and social assistance (1%), and utilities (0.5%) which are all essential as Canada tries to survive the multiple effects of COVID-19. In addition, TFWs also contribute to other areas that while not directly listed as essential services, remain crucial in promoting Canadians' safety and comfort. As figures from Lu (2020) suggest, TFWs occupy an indispensable proportion of labour in household services (9.8%), gasoline station works (8%), storage and warehousing (4.3%).

Additionally, TFWs are engaged in the delivery of in-home care to children, the elderly, and people with disabilities as well as in providing cleaning work, delivery services, and construction (Faraday, 2021; Faraday, et al. 2021). Disaggregating data for caregivers from the TFWP work permit holders (Annex 1), Figure 7 shows that, as of December 31, 2020, there were 7,670 caregiver permit holders, constituting the 10% of TFWs in Canada for the same year. Meanwhile, Buckley et al. (2016) caution that although "data sources on migrants in the construction workforce in Canada do not provide a complete picture of migrant labour conditions" (p.24), between 2005-2009, an estimated 42,500 workers entered Canada under the TFWP to work in the construction industry. Stating that Alberta employers are "among the most enthusiastic users of temporary foreign workers" (p.27), Foster & Barnetson (2017) report that in 2013 there were 7,905 TFW and 3,295 IMP holders in construction occupations in the Province.

Figure 7:

TFWP caregiver work permit holders by program and destination, 2017 – 2020

Province/territory and programs			2016	2017	2018	2019	2020
Newfoundland and Labrador Total							
		Live-In Caregiver Program	0	0	0	0	0
		Live-In Caregiver Occupations	0	--	--	--	--
		Live-In Caregivers	0	--	--	--	--
		Caregivers	0	0	0	--	--
Prince Edward Island Total							
		Live-In Caregiver Program	20	--	--	--	0
		Validation exemption for persons admitted under the former foreign domestic program (FDM)	0	0	0	0	0
		Live-In Caregiver Occupations	--	--	--	5	--
		Live-In Caregivers	20	10	5	5	--
		Caregivers	--	10	10	5	--
Nova Scotia Total							
		Live-In Caregiver Program	10	--	0	0	0
		Live-In Caregiver Occupations	--	--	5	5	5
		Live-In Caregivers	15	--	5	5	5
		Caregivers	--	5	5	5	--
New Brunswick Total			865	780	765	995	1,360
		Live-In Caregiver Program	410	200	65	15	10
		Validation exemption for persons admitted under the former foreign domestic program (FDM)	0	0	0	0	0
		Live-In Caregiver Occupations	75	75	85	180	255
		Live-In Caregivers	485	275	150	195	265
		Caregivers	50	145	220	255	275
Quebec Total							
		Live-In Caregiver Program	3,775	1,385	355	100	75
		Emergency Live-In Caregiver Program Work Permit	0	0	0	0	0
		Validation exemption for persons admitted under the former foreign domestic program (FDM)	--	0	0	0	0
		Live-In Caregiver Occupations	590	985	1,550	1,960	2,165
		Live-In Caregivers	4,365	2,370	1,905	2,060	2,240
		Caregivers	1,075	2,290	2,795	2,680	1,425
Ontario Total							
		Live-In Caregiver Program	15	--	--	--	0
		Live-In Caregiver Occupations	--	10	10	20	25
		Live-In Caregivers	20	10	10	20	25
		Caregivers	10	20	20	20	15
Manitoba Total							
		Live-In Caregiver Program	110	30	10	--	--
		Live-In Caregiver Occupations	20	20	20	20	25
		Live-In Caregivers	130	50	30	25	25
		Caregivers	30	50	75	90	55
Saskatchewan Total							
		Live-In Caregiver Program	1,675	470	115	30	20

		Live-In Caregiver Occupations	410	450	505	580	570
		Live-In Caregivers	2,085	915	620	610	590
		Caregivers	385	660	795	825	500
Alberta Total							
		Live-In Caregiver Program	1,565	570	135	35	25
		Live-In Caregiver Occupations	275	560	880	1,145	1,375
		Live-In Caregivers	1,845	1,135	1,015	1,180	1,400
		Caregivers	470	1,050	1,340	1,440	845
British Columbia Total							
		Live-In Caregiver Program	--	--	--	0	0
		Live-In Caregiver Occupations	--	--	5	--	--
		Live-In Caregivers	5	5	5	--	--
		Caregivers	--	--	--	--	--
Yukon Total							
		Live-In Caregiver Program	15	--	0	0	0
		Live-In Caregiver Occupations	--	0	--	--	--
		Live-In Caregivers	15	--	--	--	--
		Caregivers	5	5	10	10	5
Northwest Territories Total							
		Live-In Caregiver Program	0	0	0	0	0
		Live-In Caregiver Occupations	--	--	5	--	--
		Live-In Caregivers	--	--	5	--	--
		Caregivers	0	--	--	--	0
Total			11,010	9,005	9,020	9,430	7,670
Total TFW Permit holders			51,075	46,060	56,035	73,425	76,955
% Share of caregivers to Total TFW Permit holders			21.56	19.55	16.1	12.84	9.96

The work lives of migrant workers engaged in academe are also informed by dimensions of precarity (see *Figure 8*) (Rose, 2020). The Canadian Association of University Teachers (CAUT) reports that between 2015 and 2018 the number of university professors and lecturers who held work permits under the IMP in Canada averaged 5,412 per annum (Rose, 2020). Further, the average number of university professors and lecturers who held work permits under the Temporary Foreign Worker Program (TFWP) in Canada in a given year was 295. Among this group, those 258 held IMP work permits, and an average of 93 held TFWP work permits (p.8). “These non-regular faculty constitute a [growing] reserve of low-paid and marginalized academic workers, and an increase in the number of doctorates granted each year in Canada guarantees a continuous supply of highly exploitable workers” (Rose, 2020, p.7). Amidst the backdrop of corporatization of universities and devaluation of teaching, Rose recommends additional interrogation and actions on improving the employment status and rights of the precariat in post-secondary education, which is particularly pressing as educators are under pandemic conditions considered frontline workers (Colier & Burke, 2021).

Figure 8: Three Dimensions of Precarious Employment



Source: *Standing Committee on Human Resources, Skills and Social Development and the Status of Persons with Disabilities, 2019*

Contributing quantifiable resources and other enabling mechanisms for Canada's socio-economy: Canada is a country of immigrants and a nation dependent on migrant workers for economic development. The numerous iterations of temporary work programs in the country goes beyond the accumulation of centuries of migrant work (Brown-McLaughlin, 2020; Trautman, 2014), but are actual state instrumentalities “to pursue and maintain global economic competition while externalizing the cost of labour by inhibiting access to Canadian citizenship for many foreigners entering Canada” (p.125). The author explains further that the TFWPs were constructed “to sit at the fault line between a need for immigration and the desire to exclude immigrants from the nation (p.127) and is therefore a powerful tool in constructing a category of worker that was externalized from the Canadian nation both ideologically and politically yet laid the foundations for providing access to a profitable labour force needed to maintain capitalist expansion.

In an effort to quantify sectoral market value and TFW contributions, we aim to provide economic valuation of their contributions as a major human resource group in Canadian industries as well as in Canada as a whole.

In 2018, the farm receipt from Canada's primary agriculture sector amounted to \$62.4 billion. Approximately 13.5% (\$8.4 billion) of this was realized in the horticulture industry, which

includes vegetables and melon farming, fruit, and tree nuts farming as well as nursery, greenhouse, and floriculture (Statistic Canada, 2020). Considering that in the same year, there were nearly 54,734 or 19.5% of all jobs in the industry filled by temporary foreign workers, Figure 9 reconstructs data from Figure 3A to calculate the potential value of TFWs' contributions as a proportion of their total job share.

Zhang, Ostrovsky & Arsenault (2021) use the latest Agriculture and Agri-Food Canada data and suggest that based on total production value, the food and beverage processing industry accounts for 17% of total manufacturing sales and 2% of national gross domestic product in 2019. Noting that according to Lu (2030), TFWs contribute at least 3.4% of all workers in food manufacturing, TFWs' contribution in these economic indicators, although challenging to precisely quantify, cannot be discounted. Meanwhile, meat processing as the largest unit in the industry, is reported by the Food Processing Human Resources Council (2017) to be at \$7.64 billion in export value and \$7.64 billion in GDP contribution, accounting for 25% of Canada's food and beverage exports. As the meat processing sector continues to be a vital player in helping Canada realize its ambitious agri-food export target of \$75 billion by the year 2027 (Food Processing Skills Canada, 2019), it is again worthwhile to consider that 3% of the current total workforce of meat plants in the country are TFWs. As the Canadian Meat Council (n.d) argues:

Jobs in the meat industry are not temporary; they are permanent. However, in the context of a manifestly insufficient number of Canadians, and the lack of recognition of the requirement for high demand special or semi-skilled immigrants with butcher and meat cutter knowledge and skills, the only option remaining for meat processors during the past decade was to supplement their domestic recruitment initiatives with workers accessed through the Temporary Foreign Worker Program (TFWP). Temporary foreign workers not only allowed the industry to maintain existing levels of production, but also permitted increases in plant capacity, number of shifts, and value-added production to take advantage of new and expanded market opportunities (p.4).

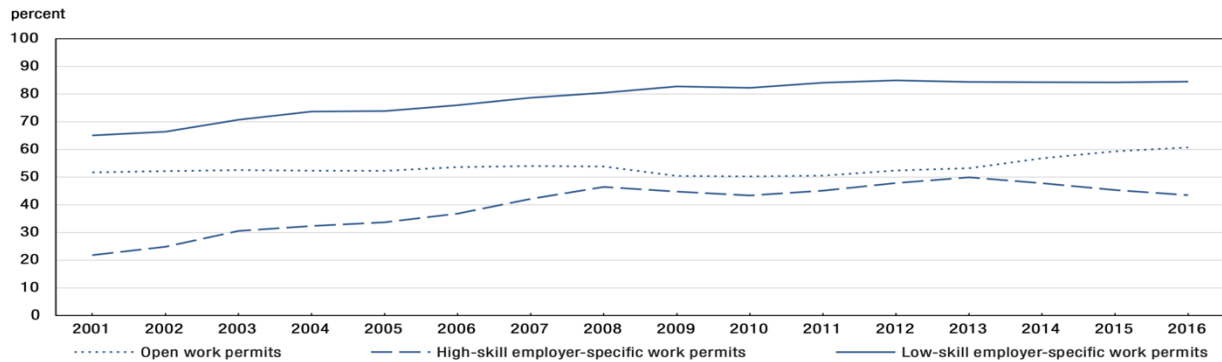
Figure 9:

TFWs' contribution in Horticulture Farm Receipt as a Proportion of Job Share, 2018

Agricultural sector/subsector	Number of jobs filled, 2018	Percentage share of TFWs in all filled jobs, 2018	Total farm receipt, 2018	Potential value of TFWs' contribution, as proportion of total job share
Primary agriculture	280,687	19.5 (54, 734)	62.4 billion	12.168 billion
Horticulture	125,861	36.90 (46,447)	8.4 billion	3.1 billion
Vegetable and melon farming	33,191	39.8 % (13,210)		
Fruit and tree nut farming	40,130	37% (14,848)		
Green house, nursery and floriculture production	52,540	35% (18,389)		

Figure 10:

Percentage of TFWs with T4 earnings among OWP and low-skill and high-skill ESWP holders, 2001 to 2016



Source: Lu & Hou (2019)

Figure 11:
Shares of TFWs in total T4 earners and
total T4 earnings by province and three territories combined, 2006 and 2016

	In total T4 earners			In total T4 earnings		
	OWP holders	High-skill ESWP holders	Low-skill ESWP holders	OWP holders	High-skill ESWP holders	Low-skill ESWP holders
	percent					
Canada						
2006	0.5	0.2	0.3	0.1	0.4	0.1
2016	1.2	0.3	0.3	0.6	0.6	0.1
Newfoundland and Labrador						
2006	0.1	0.1	0.0	0.0	0.5	0.0
2016	0.4	0.4	0.1	0.2	1.4	0.0
Prince Edward Island						
2006	0.1	0.1	0.1	0.0	0.1	0.1
2016	0.5	0.1	0.9	0.3	0.3	0.5
Nova Scotia						
2006	0.2	0.1	0.1	0.1	0.2	0.0
2016	0.7	0.2	0.3	0.4	0.3	0.1
New Brunswick						
2006	0.2	0.1	0.0	0.1	0.1	0.0
2016	0.4	0.1	0.3	0.2	0.1	0.2
Quebec						
2006	0.3	0.1	0.1	0.1	0.3	0.0
2016	0.7	0.3	0.3	0.3	0.5	0.1
Ontario						
2006	0.6	0.2	0.4	0.2	0.5	0.1
2016	1.3	0.3	0.4	0.6	0.7	0.1
Manitoba						
2006	0.2	0.1	0.2	0.1	0.2	0.1
2016	0.9	0.2	0.2	0.5	0.4	0.1
Saskatchewan						
2006	0.2	0.1	0.1	0.1	0.2	0.0
2016	0.8	0.4	0.2	0.4	0.4	0.1
Alberta						
2006	0.5	0.3	0.3	0.1	0.5	0.1
2016	1.3	0.4	0.4	0.6	0.7	0.2
British Columbia						
2006	0.8	0.3	0.3	0.2	0.5	0.1
2016	2.2	0.4	0.4	0.9	0.7	0.2
Territories						
2006	0.3	0.3	0.1	0.1	0.5	0.0
2016	0.8	0.1	0.2	0.4	0.2	0.1

Source: Lu & Hou (2019)

T4 earnings are an indication of labour market participation as a paid worker and may act as proxy measure of TFWs' relative importance in the labour market. Figure 10 compares the percentage of TFWs with T4 earnings among OWP and low-skill and high-skill ESWP holders from 2001 to 2016. Lu and Hou (2019) suggest that across the years included in their analysis, the proportion of T4 earners among low-skilled ESWP holders is higher than that of OWP and low-skill ESWP holders. Moreover, in 15 years, T4 earners from these groups grew from 65 to 85%, 52% to 61%, and 22 to 44% respectively. Figure 11 reflects the importance of TFWs as a labour source in all provinces and at the national level as their percentage share among T4 earners as well as in T4 earnings showed a general upward trend.

Figure 12:

TFWs' share in total T4 earners and total T4 earnings in top 12 industrial sectors that hired temporary foreign workers, 2006 and 2016

Industry sector (NAICS code)	In total T4 earners			In total T4 earnings		
	OWP holders	High-skill ESWP holders	Low-skill ESWP holders	OWP holders	High-skill ESWP holders	Low-skill ESWP holders
	percent					
Agriculture, forestry, fishing and hunting (NAICS 11)						
2006	0.3	0.2	5.6	0.1	0.2	2.6
2016	0.5	0.3	12.8	0.3	0.4	8.5
Construction (NAICS 23)						
2006	0.3	0.3	0.1	0.1	0.3	0.0
2016	0.7	0.3	0.0	0.4	0.5	0.0
Manufacturing (NAICS 31, 32, 33)						
2006	0.4	0.2	0.1	0.2	0.5	0.0
2016	0.9	0.3	0.2	0.4	0.8	0.1
Wholesale trade (NAICS 41)						
2006	0.5	0.3	0.1	0.1	0.5	0.0
2016	0.9	0.3	0.1	0.5	0.9	0.1
Retail trade (NAICS 44, 45)						
2006	0.5	0.0	0.0	0.2	0.1	0.0
2016	1.3	0.1	0.1	0.8	0.3	0.1
Professional, scientific and technical services (NAICS 54)						
2006	0.5	0.8	0.1	0.2	0.8	0.0
2016	1.8	1.3	0.1	0.9	1.6	0.0
Administrative and support, waste management and remediation services (NAICS 56)						
2006	1.3	0.1	0.1	0.5	0.3	0.0
2016	2.7	0.2	0.1	1.4	0.5	0.1
Educational services (NAICS 61)						
2006	0.5	0.5	0.0	0.1	0.4	0.0
2016	0.9	0.4	0.0	0.3	0.4	0.0
Health care and social assistance (NAICS 62)						
2006	0.2	0.2	0.1	0.1	0.2	0.0
2016	0.6	0.1	0.0	0.4	0.2	0.0
Arts, entertainment and recreation (NAICS 71)						
2006	1.2	0.6	0.1	0.4	3.2	0.0
2016	2.3	0.6	0.1	1.0	4.7	0.1
Accommodation and food services (NAICS 72)						
2006	1.2	0.2	0.1	0.6	0.3	0.1
2016	3.4	0.4	0.2	2.6	0.6	0.3
Other services (NAICS 81)						
2006	0.5	0.1	2.2	0.2	0.2	0.9
2016	1.0	0.3	0.2	0.6	0.5	0.1

Source: Lu & Hou (2019)

Considering Canada's top 12 industrial sectors that hired the most TFWs, Figure 12 indicates that:

OWP holders were overrepresented in five sectors: accommodation and food services; professional, scientific and technical services; administrative and support, waste management and remediation services; arts, entertainment and recreation; and retail trade. In particular, OWP holders accounted for 3.4% of the total T4 earners and 2.6% of total T4 earnings in accommodation and food services in 2016. High-skill ESWP holders were overrepresented in professional, scientific and technical services, and in arts, entertainment and recreation. In comparison, low-skill ESWP holders were overrepresented in agriculture, forestry, fishing and hunting. In 2016, low-skill ESWP holders accounted for 12.8% of total T4 earners and 8.5% of T4 earnings in agriculture, forestry, fishing, and hunting (Lu & Hou, 2019, p.4).

Zhang, Ostrovsky, and Arsenault (2021) also used T4 data from the Canadian Employer–Employee Dynamics Database (CEEDD) 2005–2017 to shed light on the importance of foreign workers. Figure 13 tabulates the participation of TFW T4 holders in all Canadian industries as well as in food manufacturing and its sub-sectors. Data suggest that in a span of 12 years, the percentage share of TFWs in the staffing of all industries in Canada increased by 203.10% (180,600 to 547,400). The percentage increase in TFW labour participation in the manufacturing industry for the same period reached 200% (4700 to 14100). In 2017, the percentage share of TFWs in food manufacturing outpaced that of all industry, at 3.9% vs. 2.9%. A closer look at food manufacturing

subsectors also indicates an increased reliance on foreign workers. In particular, their share in the total labour force of dairy manufacturing showed a 25% increase (400 to 500); in the meat industry a 137.5% increase (1600-3800); in bakeries and tortilla preparation a 254.55% rise, and in seafood industries a staggering 2,000% (100 to 2100). TFWs are also contributing the highest share of labour in the seafood subsector (5.9%) followed by bakeries and tortilla manufacturing (5.3%), meat (3.7), and dairy at 1.5%.

Figure 13:
Counts and shares of foreign workers among all workers in food manufacturing

	All industry		Food manufacturing		Dairy		Meat		Seafood		Bakeries and tortilla		Other food manufacturing	
	count	share percent	count	share percent	count	share percent	count	share percent	count	share percent	count	share percent	count	share percent
2005	180,600	1.1	4,700	1.2	400	0.9	1,600	1.6	100	0.3	1,100	1.9	1,400	1.2
2006	201,900	1.2	5,000	1.4	200	0.6	2,100	1.9	200	0.4	1,100	1.9	1,300	1.3
2007	240,900	1.4	6,500	1.8	300	0.7	3,200	2.9	300	0.6	1,300	2.1	1,400	1.4
2008	289,500	1.6	8,800	2.5	400	0.8	4,400	4.2	400	0.9	2,000	3.2	1,700	1.6
2009	313,000	1.8	9,200	2.8	400	1.0	4,400	4.6	500	1.1	2,000	3.6	2,000	2.0
2010	327,700	1.9	8,800	2.7	400	0.9	3,900	4.1	600	1.6	1,800	3.3	2,200	2.3
2011	343,900	1.9	8,500	2.6	400	0.9	3,000	3.2	1,000	2.5	1,800	3.3	2,300	2.2
2012	378,700	2.1	9,300	2.8	400	0.9	3,000	3.2	1,400	3.6	2,200	3.8	2,400	2.5
2013	412,100	2.3	9,900	3.0	300	0.9	2,900	3.2	1,500	4.1	2,300	3.7	2,800	2.8
2014	439,200	2.4	10,500	3.2	400	1.0	3,200	3.5	1,800	4.9	2,400	3.7	2,800	2.7
2015	450,000	2.4	11,000	3.3	400	1.1	3,600	3.8	1,700	4.8	2,500	3.9	2,800	2.7
2016	479,900	2.6	12,100	3.5	500	1.2	3,500	3.6	2,000	5.5	3,000	4.8	3,100	2.8
2017	547,400	2.9	14,100	3.9	500	1.5	3,800	3.7	2,100	5.9	3,900	5.3	3,700	3.4

Source: Zhang, Ostrovsky & Arsenault (2021)

As T4 hold valuable information including employment insurance premiums and income tax deductions, the accounting of TFW positions outlined in *Figure 13* may allow us to approximate the number of foreign workers contributing to the Canadian coffers for social services. Meanwhile, *Figure 14* presents the annual earnings shares of foreign workers as a proportion of earnings received by all workers in different subsectors of the food manufacturing industry. Providing insights on the patterns of disproportion in TFWs' employment and earning share, Zhang, Ostrovsky, and Arsenault (2021) note that,

Although the employment share of foreign workers in food manufacturing was 3.9% in 2017, their earnings share was only 2.3%. The difference in their employment and earnings likely results from the combination of fewer months of work and lower wages among foreign workers relative to Canadian-born workers. Although the earnings share for foreign workers in food manufacturing was smaller than the employment share, the relative gap was slightly smaller than that between the earnings (1.6%) and the employment (2.9%) shares of all foreign workers in Canada. The earnings share of foreign workers in seafood product preparation and packaging in 2017 (5.1%) was 2.7 percentage points higher than that in meat product manufacturing (2.4%), although the total earnings of foreign workers in the latter sector were about two and a half times as high (\$89.9 million) as in the former (\$35.6 million).

Figure 14:
Annual T4 earnings and shares of foreign workers among all workers in food
manufacturing

	All industry		Food manufacturing		Dairy		Meat		Seafood		Bakeries and tortilla		Other food manufacturing	
	total earnings (\$1000)	share percent	total earnings (\$1000)	share percent	total earnings (\$1000)	share percent	total earnings (\$1000)	share percent	total earnings (\$1000)	share percent	total earnings (\$1000)	share percent	total earnings (\$1000)	share percent
2005	6,217,811	0.8	129,005	1.1	24,061	1.1	34,596	1.2	1,786	0.2	20,348	1.4	48,213	1.1
2006	6,174,440	0.8	137,459	1.2	19,666	1.0	52,357	1.5	2,083	0.3	22,231	1.5	41,121	1.1
2007	7,519,422	0.9	185,711	1.6	23,577	1.1	73,076	2.1	2,428	0.4	25,973	1.7	60,657	1.5
2008	8,861,219	1.1	257,192	2.2	24,250	1.2	129,531	3.7	5,208	0.7	37,994	2.4	60,208	1.5
2009	9,656,687	1.2	296,606	2.5	26,847	1.3	140,948	4.1	6,650	0.9	50,076	3.2	72,085	1.9
2010	10,016,329	1.2	284,753	2.4	28,405	1.3	131,112	3.7	8,863	1.4	40,820	2.7	75,553	1.9
2011	10,661,811	1.3	259,848	2.3	27,047	1.3	98,398	2.9	17,619	2.6	41,021	2.8	75,762	2.0
2012	12,115,067	1.4	235,580	2.1	26,044	1.2	77,373	2.3	25,743	3.8	37,400	2.5	69,021	1.8
2013	13,748,378	1.6	249,422	2.1	18,743	1.1	83,026	2.4	27,304	4.0	49,231	2.6	71,117	1.8
2014	14,363,364	1.6	277,113	2.3	21,953	1.2	96,060	2.8	31,765	4.8	47,750	2.4	79,584	2.0
2015	14,090,719	1.5	283,889	2.2	25,050	1.3	108,762	2.4	30,293	4.4	41,071	2.2	78,713	1.9
2016	13,981,961	1.6	287,876	2.3	34,868	1.8	97,400	2.7	32,703	4.6	37,413	2.2	85,491	2.0
2017	14,713,654	1.6	297,695	2.3	26,736	1.5	89,919	2.4	35,599	5.1	63,527	2.9	81,914	1.9

Note: All dollar amounts are presented in 2017 constant dollars.

Source: Zhang, Ostrovsky & Arsenault, 2021

Unfilled job vacancies bring economic repercussions, and different studies already point to the contributions of TFWs as indispensable human resource for Canadian sectors. The CAHRC (2020)'s Impact of Access to Foreign Workers on the Agriculture Industry provides a snapshot of SAWP and TFWP workers' participation in Canada's national and provincial agricultural workforce and the opportunity cost of unfilled work positions due to SAWP and TFWP workers' inability to enter Canada due to the pandemic. In 2017, the 59,500 international workers who entered the country through the Season Agricultural Worker Program (SAWP) and the Temporary Foreign Worker Program (TFWP) helped reduce Canada's farm labour vacancies from 76,000 down to 16,500 positions that could not be filled on farms, and thereby lowered revenue lost to only \$2.9 billion. If the proportional equivalent of the labour and opportunity provided by the SAWP ($[76,000/16500] \times 2.9$) is calculated, it is possible that close to a \$10.46 billion loss in the Canadian agriculture was prevented in 2017 by relying on foreign workers.

Considering the above data, the CAHRC (2020) also projected the potential effect of SAWP and TFWP workers' delay or non-arrival in Canada in spring 2020 due to the pandemic. Among the issues identified by the Council include:

- Canadian food production and supply would be negatively impacted for the next 12 – 18 months, specifically fruits and vegetables.
- Stress, production delays, lost sales, and delays or cancellations for farm expansions or upgrades would exceed well beyond the reported figures of 2018 when 47% of agricultural producers reported these concerns.
- Without access to SAWP and TFWP workers producers will face:
 - job losses for Canadian workers, managers and business owners
 - business closures of farms

- a negative impact on food processing abilities
- animal welfare concerns
- health, food safety and food security concerns

Due to the particularly high dependency on TFWs, border restrictions resulting from the COVID-19 pandemic is expected to impact fruits, vegetables, greenhouse, and nursery operations (Statistics Canada, 2020).

Figure 15:
Unfilled labour issues in the agriculture sector that will be exacerbated by reduced or delayed access to foreign workers

Industry/Subsector	% share of TFWs and SAWs in workforce in 2017	Unfilled labor needs as of 2017 despite hiring TFWs and SAWs	Cost of unfilled labor (aside from other production losses and delays)
Horticulture	<i>44% of total workers; 33.33% of all farms have foreign workers</i>	<i>50% of all farms reported not finding all workers needed</i>	<i>\$622 million in lost sales.</i>
Field fruits and vegetables	<i>43% of total workers</i>	<i>1500 positions</i>	<i>\$403 million in lost sales.</i>
Greenhouse, Nursery and Floriculture	<i>40% of total workers</i>	<i>2800 positions</i>	<i>\$103 million in lost sales.</i>
Tree, fruit and vine	<i>51% of total workers</i>	<i>900 positions</i>	<i>\$94 million in lost sales.</i>

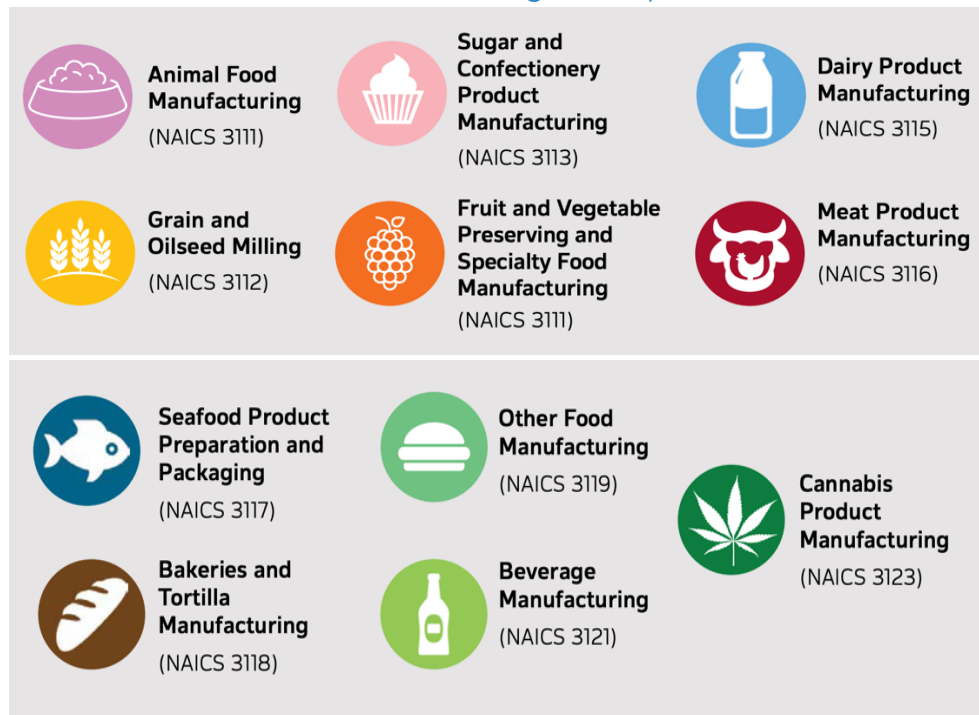
As part of the provincial level analysis, the CAHRC (2020) also warns that Alberta’s current statistics of 2,800 unfilled agricultural jobs and the resultant lost sales of \$821 million due to production losses and delays will likely worsen. Overall, the council suggests that “Without the participation of SAWP or TFWP workers, job vacancies will be extensive, businesses will struggle to remain viable and the impacts on the Canadian food system and supply would be severe (CAHRC, 2020, p.3).

At the Crossroad to Greatness—Key Insights & Labour Market Research About Canada’s Food and Beverage Processing Industry (Food Processing Skills Canada, 2021) quantifies the financial impact of unfilled jobs in the industry and its 11 sub-sectors (*Figure 16*). The paper reports:

Assuming a direct relationship between total net revenue and total employment, a single unfilled position in the food and beverage processing industry could cost businesses as much as \$190 per day in lost net revenue. FPSC’s 2020 employer survey found that food and beverage processors had an average of six vacant

positions. With over 7,600 businesses (excluding those without employees) in the food and beverage processing industry, industry-wide losses from job vacancies could total up to staggering \$8.5M in net revenue per day. Assuming that the level of vacancies is constant throughout the year the \$8.5M per day becomes \$3.1B per year ((Food Processing Skills Canada, 2021, p.66).

Figure 16:
The Canadian Food Processing Industry and Sub-sectors



Source: *Food Processing Skills Canada, 2021*

Figure 17:

Latest preliminary data on TFWs in the agriculture and agri-food sectors

Canada (map)				
Temporary foreign workers				
Industry	2017	2018	2019	2020
	Number			
Agricultural industries, total	53,842 ^r	56,919 ^r	53,605	50,126 ^p
Cattle and ranch farming [1121]	1,856 ^r	1,992 ^r	1,920	1,800 ^p
Hog and pig farming [1122]	902 ^r	989 ^r	995	918 ^p
Poultry and egg production [1123]	531 ^r	664 ^r	692	646 ^p
Other animal production ²	987 ^r	1,050 ^r	946	850 ^p
Oilseed and grain farming [1111]	1,693 ^r	1,597 ^r	1,329	1,207 ^p
Vegetable and melon farming [1112]	13,184 ^r	13,147 ^r	11,906	11,222 ^p
Fruit and tree nut farming [1113]	13,142 ^r	14,085 ^r	12,777	11,916 ^p
Greenhouse, nursery and floriculture production [1114]	17,558 ^r	19,301 ^r	19,234	18,003 ^p
Other crop farming [1119]	3,989 ^r	4,094 ^r	3,806	3,564 ^p
Food and beverage manufacturing industries, total	20,115 ^r	23,635 ^r	25,555	23,985 ^p
Animal food manufacturing [3111]	571 ^r	399 ^r	501	460 ^p
Grain and oilseed milling [3112]	230 ^r	324 ^r	391	357 ^p
Sugar and confectionery product manufacturing [3113]	713 ^r	786 ^r	886	832 ^p
Fruit and vegetable preserving and specialty food manufacturing [3114]	1,411 ^r	1,965 ^r	2,108	1,994 ^p
Dairy product manufacturing [3115]	743 ^r	799 ^r	930	870 ^p
Meat product manufacturing [3116]	4,908 ^r	6,381 ^r	6,407	5,964 ^p
Seafood product preparation and packaging [3117]	2,299 ^r	2,161 ^r	2,040	2,015 ^p
Bakeries and tortilla manufacturing [3118]	5,094 ^r	5,598 ^r	6,160	5,765 ^p
Other food manufacturing [3119]	2,565 ^r	3,349 ^r	3,875	3,632 ^p
Beverage manufacturing [3121]	1,581 ^r	1,873 ^r	2,257	2,096 ^p

Source: *Statistics Canada, 2021*

If the report from the Food Processing Skills Canada (2019) is followed, and considering that as of 2017, 1,800 workers in meat processing plants are temporary foreign workers, another role of TFWs is therefore to prevent a daily net revenue lost of \$342,000. If calculated further, this amounts close to \$4.1 million monthly or \$49.2 million annually. For the meantime, the FPSC cites that the meat processing industry aims for additional 3,400 workers within five years to reach its 2030 growth target, Serecon, Inc. (2019) warns however that, “The level of skill required in packing plants and the difficult environment makes it difficult to recruit and retain workers. Canadian employees are generally less inclined to remain in a position with difficult conditions than foreign workers” (p.69). With this, foreign workers’ contribution to helping the Food Processing Industry in filling jobs and growing revenue can be expected to rise in the next years. Expanding this calculation using the latest preliminary data on temporary foreign workers in the agriculture and agri-food sectors (*Figure 17*), Figure 18 breaks down TFW’s contribution in the agri-food sectors’ revenue lost abatement as of 2020.

Figure 18:

TFW's contribution in the agri-food sectors' revenue lost abatement as of 2020.

Food And Beverage Subsectors	Projected Number of TWFs as of 2020	Daily Net Revenue Lost Abated (\$)	Monthly Net Revenue Lost Abated (\$)	Annual Net Revenue Lost Abated (\$)
Animal food manufacturing	460	87,400	2,622,000	31,464,000
Grain and oil seed milling	357	67,830	2,034,900	24,418,800
Sugar and confectionery product manufacturing	832	158,080	4,742,400	56,908,800
Fruit and vegetable preserving and specialty food manufacturing	1994	378,860	11,365,800	136,389,600
Dairy product manufacturing	870	165,300	4,959,000	59,508,000
Meat product manufacturing	5964	1,133,160	33,994,800	407,937,600
Seafood product preparation and packaging	2015	382,850	11,485,500	137,826,000
Bakeries and tortilla manufacturing	5765	1,095,350	32,860,500	394,326,000
Beverage manufacturing	2096	398,240	11,947,200	143,366,400
Other manufacturing	3632	690,080	20,702,400	248,428,800
Total	23,985	4,557,150	136,714,500	1,640,574,000

Aside from the above economic values, UFCW Canada and the Agriculture Workers Alliance (2020) also establish that TFW contribute to ensuring health development assistance to the wider Canadian population through the Employment Insurance (EI) as a mandatory payroll deduction. SAWP workers and their employers pay an estimated \$21.5 million annually in EI premiums and contribute nearly \$49 million each year to the Canada Pension Plan (CPP), which in turn benefits Canadian retirees and workers who have lost their jobs. SAWP participants also pay \$20 million in annual income tax. These tax dollars fund essential programs and services such as post-secondary education and social programs for children. In total, seasonal migrant farmworkers and their employers contribute an estimated \$90.6 million to the Canadian government every year. While labouring in Canada, SAWP workers spend \$22 million in the Canadian economy, money that supports local businesses and their employees. Finally, SAWP workers produce an estimated

\$4.5 billion in economic output in the country's agricultural sector, which in turn supports almost 19,200 domestic jobs annually. The estimated total economic footprint of SAWP participants and their employers is \$4.65 billion every year (UFCW, 2014).

Enriching discourses on migration, citizenship and COVID-19 related policies and actions:

The contributions and roles of TWP above outlined remain predicated on state narratives that (1) labour shortages require migrant workers, (2) migrants do not threaten Canadian jobs, and (3) migrants are not being exploited (Barnetson & Foster, 2014). However, as Foster and Luciano (2020) suggest, an increasing amount of literature and empirical studies now support that the proposition that TFWP is not temporary, nor is it a long term and viable solution to Canada's socio-economic targets. Additionally, while there is mixed evidence as to the TFWPs effects on local labour participation, overall, conditions of exploitation and precarity mark migrant workers' lives. It is misleading, however, to think of TFWs as fully docile. They are not solely "victims", because empirical evidence is widely available to support how temporary foreign workers are active as individuals and collectives in enriching discourses on migration and in offering alternative solutions to current issues in Canada's labour and citizenship policy regimes (Spitzer, 2020). The ethnographic study of Tungohan (2018) as an example highlights the importance of ideational, affective, and structural factors in determining temporary foreign workers' motivations and goals for staying and wanting permanence in Canada. The paper clearly elucidates how TFW themselves claim their belonging and the 'right to have right'. One participant notes, "I've gotten so used to life here and I can imagine my future here. I feel Canadian even without the passport" (p.247). Thus, Tungohan (2018) argues:

Temporary foreign workers' claims to membership in receiving states are grounded in their unwillingness to return to the economic uncertainty facing them in the Philippines, the strengths of pervading imaginations that see life abroad as indicative of success, the complex negotiations they have made to carve spaces of belonging in Canada and, ultimately, their convictions that their economic and social contributions to Canada justify their claims to formal citizenship (p. 238).

Brown-McLaughlin (2020) also suggests that SAWP and CP participants are increasingly becoming disillusioned with the neoliberal ideology of migration that promotes migration as an opportunity for a better life and are now questioning the concept of the TFW as a program. Advocating for job security, human rights, and social equity, the TFW partners in the study asserted:

Ultimately, we want to live in a society where everyone has equal access to rights, where we don't have an underclass of workers that are constantly looking over their shoulder, that they're worried that they're going to be legislated out of a job (Brown-McLaughlin, 2020, p. 132).

As a collective, UFCW Canada and the Agriculture Workers Alliance (2020) also outline migrant workers' activism and advocacy work milestones within and even outside Canada in the past 30 years and promote necessary reforms for achieving an inclusive, protective, and healthy

immigration system. *The Status of Migrant Farm Workers in Canada* provides compelling cases as to why a “pathway to permanent residency” is a far less desirable alternative to permanent residency by citing UFCW Canada’s engagement with Maple Leaf Foods (MLF) and the Manitoba Provincial government in helping foreign workers access permanent residence opportunities. The report explicates how Canada has seen a continuous expansion of the migrant and temporary foreign workforce through policies that incorporate agriculture under federal programs that deliver migrant workers to employers, but often end with situations where migrants must mend issues themselves. UFCW Canada and the Agriculture Workers, therefore, argue that Canada does not need a robust temporary foreign worker program, but a more inclusive, protective, and healthy immigration system. They add that, while Canada is a developed nation that increasingly prides itself as a place of safe refuge and a country where human rights are guaranteed to all, the notion of equality is a target that is still to aim and work for. Canada is rich in idealistic statements that can only come to fruition when the “temporary” aspect of temporary foreign worker programs is abandoned.

In context of the COVID-19 pandemic, Wells (2020) and Sorio (2021) establish the indispensability of TFWs in Canadian economy and society, the risk that TFWs take to contribute to the country’s health and safety, and the failure of Canada’s immigration programs to protect these essential workers’ short and long-term welfare. Sorio particularly points to the incongruence between state rhetoric on recognizing TFW’s recognitions and its actual immigration and citizenship programs that do not facilitate access to permanent residency. For instance, while Marco Mendicino, the Minister of Immigration, Refugees and Citizenship announced to TFW’s that: “Your status may be temporary, but your contributions are lasting—and we want you to stay,” residency opportunities remain inequitable particularly given the stringent documentary, financial and procedural requirements. As a case in point, the findings of the Migrant Rights Networks’ online survey that while the Federal Government opened permanent residency applications to 50,000 workers in healthcare and other essential sectors in April 2021, 45% of migrant workers surveyed believe they were not eligible to the opportunity (Sorio, 2021). While the survey was non-representative of all the foreign workers in Canada, participants interpreted this newly opened pathway as being limited to people with valid work permits, thereby leaving thousands of undocumented workers who left abusive employers or were laid off due to the pandemic in a state of limbo. The deadline for applications was also viewed as being too soon and a challenge even for eligible workers to complete the required documentation as well the time and money to study, pay for, and pass the required language test. Arguing that it is high time for Canada to truly value its invaluable workers, Sorio (2021) urges the Federal Government to return to regularization programs that grant permanent residency to all workers, documented or otherwise. In addition, urgent attention should be paid to the improvement of workplace conditions and to ensuring migrant workers’ freedom to leave abusive employers without fear of deportation and lost income.

The Migrant Rights Network (2021) report, *Exclusion Disappointment, Chaos and Exploitation*, is not only critical of the Federal Government’s new pathways to permanent residency, but also argues for a macro- and justice lens to resolve COVID-19 related issues for TFWs. Migrant

workers and their allies remain active in providing discourse and recommendations for Canada's pandemic, migration, and development issues. This echoes the important message that migrant workers need to be recognized not as "victims", but as individuals who not only contribute valuable skills to the economy but also exercise strong agencies and offer viable solutions for a more humane and equitable Canadian society.

Throughout the pandemic, migrant workers have been power storytellers and advocates against the conditions they have been forced to live and work in... Many TFWs have bravely spoken out in various mediums, risking their livelihoods and immigration status to bring attention to these issues. Additionally, at great personal risk, they have collected evidence of abuse to pass on to activists and organizations to further support their cause (Han, 2020. P.7).

Summary and conclusion

TFWs have been—and continue to be—important contributors to Canada's economy and society. In the past years, the growth in number and percentage share of TFWs in the overall labour force of Canada have varied due to global socio-economic as well as federal and provincial policy environments. Undeniably, TFWs are integral to the nation-building of this country and to the functioning of specific sectors and industries despite the structural constraints that render TFWs as indentured labour and technically Canadians without passports (Tungohan, 2018). Considering challenges wrought by the current COVID-19 pandemic, TFW's contradictory status of being essential, yet disposable has become more apparent.

Policy Context

To fulfill the Sustainable Development Goals (SDGs), everyone's right to health must be "respected, protected, and fulfilled" (Onarheim et al., 2018, p. 5). The United Nations Committee on Economic, Social, and Cultural Rights states that healthcare is a guaranteed right for all people—regardless of their documented status (Gostin, 2019). Therefore, all undocumented migrants in Alberta have a right to receive the same access to healthcare as citizens and other residents.

Various countries have implemented policies to provide healthcare for undocumented migrants, although most countries in Europe only provide emergency services for undocumented migrants (Gray & Ginneken, 2012). France, the Netherlands, Portugal, Spain, and Switzerland also allow undocumented migrants to access similar services to citizens if they meet certain conditions including proof of identity and length of residence in the country (Gray & Ginneken, 2012). Turkey provides access to primary, secondary, and tertiary health facilities for all refugees and migrants (WHO, 2019). Thailand and Spain are the only two countries in the world that offer the same healthcare access to undocumented migrants as regular citizens (Legido-Quigley, et al., 2019; Yan, 2016). Thailand introduced two policy actions to protect undocumented migrants: financial risk protection, and migrant-friendly services for migrants facilitating access healthcare services, and enabling them to use their health insurance (Tangcharoensathien, et al., 2017). Undocumented

migrants in Thailand must register through a national verification process in order to receive full healthcare coverage, with occasional minor out-of-pocket payments (Onarheim, et al., 2018).

Several policy options have been suggested to properly cater to this population. The WHO (2019) offers five recommendations for the provision of adequate healthcare for migrant and refugee populations. These include: high quality and affordable healthcare; cultural and linguistic sensitive health systems; proper training for health-care providers to address a range of illnesses; enhanced multisectoral action on migrant and refugee health; and improved systematic collection of health data on these populations (WHO, 2019). Gray and Ginneken (2012) found that targeted measures may be the most effective and feasible way to provide undocumented migrants with healthcare. They suggested the implementation of strategies along three dimensions focusing on specific: segments of the population (i.e. pregnant individuals, children); services (i.e. preventive services, infectious diseases), and funding policies (i.e. allowing undocumented migrants to purchase insurance). Four policy options emerged from a survey of European countries aimed at the improvement of healthcare access for undocumented migrants: comprehensive insurance coverage, coverage for specific services, increasing direct funding to providers so that out-of-pocket costs could be decreased, and allowing binational insurance coverage so that high-cost services could be covered in an individual's home country, while primary care coverage could be provided in the host country (Wallace, et al., 2013).

Matthew, et al., (2021) suggested that comprehensive immigration reform and immigration status legislation must occur to provide comprehensive healthcare for this population. Coordination between multiple levels of government is also essential (Picolli, 2020). Subnational governmental jurisdictions help redefine the space of possibilities for including undocumented workers in healthcare services within which vertical and horizontal negotiations around the protection of rights occur.

Migrants without health insurance are compelled to pay for services and medications unless a healthcare practitioner agrees to waive their fees (Ridde, et al., 2020). Caulford and D'Andrade (2012) describe barriers for undocumented migrants in receiving health care and identify the false assumptions that people have toward providing health care for uninsured individuals. First, many people assume that immigrants and refugees can obtain private health insurance, but, in reality, insurance is very costly and there are age-related exclusions that make this difficult. Second, in Ontario, uninsured individuals can access community health centres, but this is not a long-term solution to their lack of health insurance. Lastly, people believe that providing care to the uninsured is too costly for the system; however, studies show that healthcare costs decline when access to primary care services is expanded. They offer three potential policy solutions for Canada's medically uninsured population. First, they state that the three-month wait for provincial health insurance must be eliminated. Second, administrative barriers should be removed, and healthcare coverage for all eligible Canadians should be implemented. Lastly, a national working group should be established to provide evidence-based recommendations for uninsured individuals at the provincial and federal level.

Importantly, undocumented workers contribute to the economy and tax base as detailed in the previous section. As one such worker stated: "...80% of us who are in this situation, we all work, we pay taxes. We deserve to be attended to in the hospitals. We deserve all the attention that they give to everyone because we pay like everyone" (Simich, Wu, & Nerad, 2007, p. 4).

The Global Sanctuary City movement challenges cities to take initiative in providing access to services for undocumented migrants (Aery & Cheff, 2018). A few Canadian cities have adopted these policies. The City of Hamilton has implemented "access without fear" policies in which undocumented migrants have the same access to city services as citizens (City of Hamilton, 2014). Furthermore, they have committed to advocating for these populations at the federal and provincial levels. The City of Edmonton has also implemented "access without fear policies, allowing undocumented and precarious status individuals to use municipal services without fear" (City of Edmonton, 2018).

Access to Healthcare in Alberta for Undocumented Workers

The purpose of this section is to utilize Alberta as a case study, to further understand the extent of healthcare disparity faced by undocumented migrant workers. We aimed to highlight specific events and issues in Alberta that have created adverse health outcomes for migrant workers. This section will firstly discuss the healthcare access related barriers faced by migrant workers and the current state of access in Alberta. Lastly, we will discuss the impact of COVID-19 and how it has magnified existing inequities. Understanding the health disparities faced by this population, as well as contrasting barriers and policies with other provinces, will help to create a clearer picture of how one's status can drastically dictate access to healthcare.

Undocumented migrants face multiple barriers to healthcare

The biggest challenges undocumented migrants and workers face in Alberta is access to quality healthcare and education. Not only does this group of people lack access to healthcare, but it is one of the key contributors to poor health outcomes (Foster & Luciano, 2020; Salami, et al., 2020). While, in most cases, migrants with precarious status are allowed to access health services, they confront enormous challenges.

One of the main barriers is the financial cost and fear of deportation that undocumented migrants face when seeking healthcare services. This leads to tolerance of minor ailments or outright avoidance of health services. Unlike physicians working in clinics or private practice, hospitals and emergency rooms are ethically obligated to provide services to all patients regardless of their residency status (Foster & Luciano, 2020; Mattatall, 2017). Many undocumented migrants, however, are afraid to seek health services as they do not possess a valid Alberta Healthcare Card and as a result are not covered by the publicly funded healthcare system. When seeking treatment in most urgent situations, uninsured migrants face enormous out of pocket expenses, which they are unable to afford as they already struggle due to precarious employment conditions. Additionally, undocumented migrants consistently live in fear of deportation as a consequence of being reported to authorities by healthcare providers they visit (Salami, et al., 2020).

The most common reason for undocumented migrants to seek medical care is to give birth. In Calgary, a continuous increase in deliveries by non-Canadians including uninsured migrants has been observed over the past decade (Mattatall, 2017). These pregnant people often do not have another choice and have to go to hospital to deliver their babies, but afterwards they face bills of thousands of dollars which they have to pay back over many months, putting the families in even greater financial straits. Additionally, in many cases these individuals do not receive any prenatal care, which may enhance their risk for various birth complications and poor maternal health outcomes.

While some select physicians and clinics do not charge undocumented migrants, they are difficult to locate and many uninsured migrants still end up being charged for healthcare services. Some healthcare providers feel uncomfortable billing their patients once they learn that they are uninsured. Resultantly, they volunteer their time to provide services to this group of people, often in emergency situations only. Only a small number of undocumented migrants, however, is able to locate health clinics and practitioners who will not levy fees, thus the majority still ends up being charged for services (Foster & Luciano, 2020; Mattatall, 2017). When uninsured migrants receive a prescription from their healthcare provider, they immediately face another challenge; they struggle to receive their drugs as most pharmacies request a valid healthcare card to dispense prescription medications (Foster & Luciano, 2020).

Policy barriers pose additional threats to safe and continuous healthcare access for undocumented migrants. While there is actually no specific policy prohibiting access to healthcare for undocumented migrants, they are not eligible to apply for the Alberta Healthcare Insurance Plan (AHCIP) unless they have legal entry documents or a work permit of a minimum of 12 months. An extension of AHCIP for those who entered Canada legally, but are now waiting for their residency or work permits to be renewed, is limited to a few months (Gov. Alberta, 2021). Afterwards, they are on their own. Changes in policies regarding TFWs, such as the shift from permanent to temporary migration, have further exacerbated access to healthcare. Many migrants with precarious status have tried to challenge their healthcare coverage in court arguing that access to healthcare is a basic human right covered under Canadian law, but to date their fights have been unsuccessful (Chen, 2017).

COVID-19 has widened existing healthcare disparities.

The onset of the COVID-19 pandemic has highlighted jarring inequities in the healthcare system, while disproportionately affecting the province's most vulnerable (Benjamin, et al., 2021). In Alberta, where undocumented migrants already face unreasonable barriers to healthcare access, the pandemic has amplified existing inequities (Benjamin, et al., 2021). For instance, the COVID-19 outbreak in the Cargill meat-packing plant in High River, AB, was linked to 25% of the Province's cases in October 2020. Most of these workers were TFWs, approximately 70% of whom were from the Philippines, while others were newcomers from Mexico and Chile (Green, 2020). Additionally, it is estimated that there are approximately 20,000 undocumented workers residing in Canada, most of whom take up precarious employment, for example in meat-packing

plants, to survive (Foster & Luciano, 2020). The physical and mental impacts of COVID-19 have arguably been heightened for migrant workers who have reported issues such as deteriorating mental health, language barriers limiting understanding of public health guidelines, loss of income and problems obtaining documentation (Benjamin, et al., 2021). In the early days of the pandemic, when social distancing was a preliminary measure to stop the spread of the virus, many workers in precarious employment were unable to comply (Baum, et al., 2020; Benjamin, et al., 2021; Bragg, 2020; Green, 2020). Carpooling, close living conditions, and cramped working conditions were inherent to their jobs (Dryden, 2021). Neither did they have the option to work from home as many Canadians did nor to receive employment insurance (Dryden, 2021). For some, fear of missing days of work, even if exhibiting symptoms, would have meant losing work, which would mean losing income and, for those who possessed it, legal status in Canada (Dryden, 2021). For undocumented workers, federal benefits and health supports available to many Canadians were unavailable. In this instance, it is clear to see how exploitation and fear has plagued migrant workers' rights to health during the COVID-19 pandemic.

In the case of COVID-19 vaccinations, many workers reported language barriers, inaccessibility to clinics and a mere lack of knowledge that vaccines were being offered—a nod to the incompatibility of generic public health messaging (Benjamin, et al., 2021; Dryden, 2020). Generic public health messaging was not tailored for the temporary foreign workers who did not speak English well, were hesitant to access the healthcare system or did not have access to the internet (Benjamin, et al., 2021; Dryden, 2020). Additionally, in the case that workers knew of vaccinations, clear messaging on how to access these services without an Alberta Healthcare card was inconsistent and identified as a deterrent (Benjamin, et al., 2021; Dryden, 2020). Although some messaging stated a valid card will not be asked for upon arrival, this was not always the case when one arrived at their appointment. For an undocumented worker the possibility of being asked for a valid card was enough to deter one from seeking vaccination, despite the presence of such vaccination services. Here, a need for transparent and consistent messaging is presented, especially for migrant workers that are more likely to work jobs that require close proximity to others. Lastly, fear of deportation and the vaccine database being available to the Canadian Border Services, was also a reason to avoid vaccinations (Bains, 2021; Somos, 2021). Overall, a lack of transparency and adequate messaging represented a failure of public health efforts to protect this vulnerable population in precarious employment. In the face of pandemic, where healthcare is of utmost importance, undocumented immigrants faced severe altercations to their physical and mental health.

Conclusion.

Currently, undocumented migrants in Alberta, as in many other Canadian provinces and territories, face injustice with regards to healthcare access. They are denied healthcare services either due to their immigration status or due to the realities in which they live. Even though legally entitled to healthcare, for most undocumented migrants these rights remain only theoretical as in reality they

face fear of deportation, loss of job and income, and financial expenses they cannot afford (Chen, 2017).

Examples of Healthcare Access for Undocumented Migrant Workers

In this final section, we explore models that the Alberta government could potentially implement to provide healthcare access to undocumented immigrants. Canadian and international examples are included and discussed in further detail below. This section also documents examples of healthcare that were provided during the COVID-19 pandemic—a time that is a reminder that healthcare for all residents is crucial for the maintenance of public health.

Example of Healthcare Access for Undocumented Immigrants Internationally

Many countries do not have federal or state policies addressing healthcare for undocumented immigrants; however, local governments and organizations working towards providing accessible health services for those without state-sanctioned healthcare may be found. For example, the US government funds Federally Qualified Health Centers across the country that support care to the uninsured regardless of immigration status (Beck et al, 2019). Major cities in the European Union have created localized systems that grant healthcare access to undocumented immigrants without enforcement interactions. In Ghent, Belgium, undocumented immigrants are given access to a medical card which is valid for three months and does not require the provision of an address (PICUM, 2017). In Germany, Frankfurt and Dusseldorf employ local governments and organizations to fund the provision of uninsured healthcare for undocumented migrants, bypassing their need to register under the national German health system and face potential exposure to immigration authorities (PICUM, 2017). At the federal level, both Italy and Spain provide universal access to healthcare for undocumented immigrants through government programs that support all levels of healthcare (Beck et al, 2019). In Spain, Madrid strengthens the federal system of universal healthcare at the local level through facilitating an ongoing campaign which educates undocumented migrants about their rights to access the public health system in that country. The campaign also reminds practitioners of their duty to care for patients irrespective of status and provides ID cards for undocumented residents to ensure they have access to public services offered by the city, including healthcare (PICUM, 2017).

Example of Healthcare Access for Undocumented Immigrants in Canada

Across Canada, only two provinces, Ontario and Quebec, provide a base level of healthcare access to undocumented immigrants. Ontario has 74 community health centres and an additional 22 health centres in Toronto that provide medical services to undocumented immigrants (Association of Ontario Health Centres, 2016). Furthermore, the FCJ Refugee Centre in the City of York and a medical clinic in Scarborough have also been providing free access to healthcare (FCJ Refugee Centre, 2012; Kennedy, 2021). In Quebec, Medecins du Monde, a non-governmental organization, offers medical treatment to marginalized populations (CBC News, 2017). In Montréal, a community-based perinatal health and social centre, Maison Bleue, provides services for clients during pregnancy through to children of age five (Aube, et al., 2019). The clinic operated by

Doctors of the World in Montréal offers services for uninsured migrants with the exception of prenatal care and follow-through. Operating on donations and grants, the clinic cannot address complex needs of its target population; resultantly, unmet healthcare needs, primarily due to financial barriers are prevalent (Ridde, et al., 2020). Unfortunately, these are the only few examples within Canada for healthcare access for undocumented immigrants. Many of these centres do not have the capacity and nor the resources to take on a large number of patients highlighting the need for more support from the government for these organizations and for greater overall access to healthcare for undocumented immigrants.

Examples of Healthcare Access for Undocumented Immigrants during COVID-19

During the COVID-19 pandemic, governments across the world started to increase their healthcare access to undocumented immigrants because of the nature of this public health pandemic. The Public Health Agency of Canada has stated that COVID-19 vaccines are available to all regardless of insurance and migration status; however, the identification procedures are determined by provincial and territorial governments (Bains, 2021). As of March 2021, only Ontario and British Columbia announced that undocumented and migrant workers would not be required to present health cards to access vaccines (Bains, 2021). Many vaccination clinics in Toronto, Montréal, Edmonton, and Calgary do not check for an individual's health card, although name and date of birth are required (Kennedy, 2021; TCRI, 2020). Although legally only a first name, date of birth, and contact information (email address or phone number) are required and can be affirmed without documentary evidence, some sites will request confirmation of address. The government of Quebec also had designated medical clinics that provided free access for the diagnosis and treatment of COVID-19 (TCRI, 2020). Local health authorities and community organizations in partnership with individual physicians and advocacy groups have also launched 'barrier and surveillance free' vaccination clinics in community and workplace settings (Poncana, 2021; Tait & Graney, 2021).

On an international scale, the COVID-19 pandemic has produced both positive and negative effects for undocumented immigrants in accessing healthcare services. Pop-up vaccine clinics have circulated throughout the USA, enabling easier access to COVID-19 testing and vaccination services for undocumented immigrants. These pop-up clinics work in conjunction with a variety of institutions, including local organizations, religious institutions, local government committees, and cultural services (NRC-RIM, 2021). In Turkey, refugees and undocumented immigrants were granted access to COVID-19 testing and treatment. This response was led by the Turkish government with support from local authorities, local and international non-governmental organizations (NGOs) and community organizations. While this initiative provided COVID-19 related health services to undocumented migrants, the service created was hampered by a number of issues including language and information obstacles, which prevented migrants from accessing the specific services they required (Bahar, et al, 2020). In light of intersectional barriers related to the COVID-19 pandemic, Portugal granted undocumented migrants, who have applied for permanent residency, citizenship rights, enabling full access to the nation's healthcare services as

a method of decreasing risks associated with public health. Undocumented migrants are given access to health services while awaiting the outcome of their applications (Cotovio, 2020). While access to COVID-19 health services has been positive in many nations, the mandatory testing and vaccinations of migrant domestic workers in Hong Kong is rooted in discriminatory perspectives. Hong Kong decreed a mandatory testing policy for migrant domestic workers, a group that has been consistently targeted for increasing the spread of COVID-19 despite little evidence. While the mandatory vaccine policy for this population has been suspended, the unfair testing policies have fueled stigma surrounding migrant domestic workers, making them more vulnerable to unemployment (Lau, 2021).

The issuance of proof of vaccination certificates has added another layer of complication for undocumented migrants. In Ontario, an Ontario healthcare insurance (OHIP) card is needed to obtain a receipt via the Province's vaccination portal. Those who do not possess OHIP may procure a receipt through their local public health unit. Venues that ask for vaccination receipts require accompanying identification that verifies name and date of birth. Although some may not be aware of the regulations, these documents do not need to be government-issued nor include photo ID (Steps to Justice, 2021).

Conclusion

Many models of better healthcare access for undocumented immigrants exist both in Canada and around the world. Alberta has the responsibility to follow these examples and provide healthcare access to people irrespective of their status. Barriers to accessing healthcare, which include fear of being deported, delayed access to health services, and healthcare costs, can be mitigated using the specific strategies outlined above in creating programs and services for undocumented immigrants to access health services.

Conclusion

The plight of TFWs, including undocumented migrants, in frontline industries echo the long existing calls and demands for the revision of Canada's labour and economic policies as well its overall stance and participation in global processes of migration and development. Moreover, the COVID-19 pandemic has exposed and exacerbated health, social, and economic inequities embedded in political-economic structures. For more than a decade, migrants from select countries in the global South have increasingly been admitted into Canada on a temporary basis. These workers upon whom essential sectors of the economy are reliant are meant to be returned to their homelands after their labour has been extracted. The temporary nature of their stays in Canada and the contingencies inherent in their work visas make them vulnerable to shifts in their documented status.

Although undocumented migrants continue to contribute to Canadian society, they are not afforded the same access to healthcare as other Canadian residents. Financial barriers, fear of deportation, logistical problems, and lack of information about accessible migrant-responsive services, are all obstacles for care. Even where undocumented migrants are able to obtain free healthcare services, they are often limited in their capacity to address complex conditions or pregnancy care. As a result, undocumented migrants report a high rate of unmet health needs, which may lead to more severe conditions, higher rates of disability, and, potentially, death.

Health and wellbeing and access to healthcare, however, cannot be extracted from issues of social location, working conditions, income, migration status, and familial separation. For example, while healthcare brings to mind formal service system, much of healthcare takes place at the household level, thus the presence of family and support networks are vital. Moreover, undocumented workers may be unable lodge complaints about poor working and living conditions; some may be challenged to reach out to migrant advocacy groups who are able to channel their voices to policymakers and publics.

Calls to Action

To promote healthcare for undocumented migrants in Alberta, we offer some preliminary calls to action based on the findings in this report:

1. Support barrier-free access to vaccination, COVID-19 treatment, and proof of vaccinations;
2. Expand barrier-free healthcare services, including for pregnancy and conditions requiring tertiary care;
3. Remove waiting periods and provide universal healthcare coverage for all residents of Canada regardless of status;
4. Support community-based migrant-responsive healthcare; and
5. Grant workers permanent residency status upon arrival.

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