



## Backgrounder: Migrant Workers Deserve Healthy Jobs

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### *How it's unfair!*

- Many workers are denied provincial healthcare coverage for the first three months they are here. Broken policies mean that some workers don't get healthcare for many more months if at all.
- Many migrants are fired from work when they get sick or injured, forcing them to return home to live in poverty, and sometimes to die.
- Live-in Caregivers are excluded from the Ontario Occupational Health & Safety Act while farm workers are not protected by industry-specific health and safety regulations.
- Injured and ill migrants are seeing their workers compensation taken away when they return home. Workers are told to get a suitable job in Ontario and their compensation is cut when it is assumed they cannot comply - the WSIB calls this paradoxical and harmful practice "deeming".
- Everyone must be included in the "universal healthcare" system; farm workers need strong health and safety protection at work; caregivers must be included in occupational health and safety laws; the WSIB must give injured migrant workers the choice and means to stay in Ontario for health care and they must end "deeming" of workers who are abroad.

### *How to make it right; remember we are in it together!*

Farm workers need strong health and safety protection at work; caregivers should be included in occupational health and safety laws; and all migrants should have immediate access to health services and other benefits that all Ontarians get. Some simple policy steps Ontario could take:

- a) Industry specific regulations for agriculture:** There is an urgent need for industry-specific regulations for agriculture to ensure migrant agricultural workers have access to bathrooms in the fields, clean drinking water, and regular breaks. In addition, agriculture-specific hazards such as confined spaces, prolonged exposure to pesticides and exposure to extreme heat and

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weather must be addressed in regulations targeted to agricultural work. All agriculture related deaths must be followed by a mandatory Coroner's Inquest.

- b) **Eliminate the exclusion of Live-in Caregivers from OHS/A:** This exclusion, in addition to compromising the health and safety of a significant percentage of the Ontario workforce, is discriminatory and has an adverse effect on workers in the LCP program, many of whom are racialized women. This is even more important in the current work environment where many Live-In Caregivers are involved in elderly care, and responsible for lifting and moving employers.
- c) **Broader review of OHS/A in regards to migrant work:** With migrant workers now entering many different arenas of work, regulations must be modernized with a view to protecting vulnerable workers in those industries, including consultations from workers and community organizations.
- d) **Provide fair access to Loss of Earning benefits for migrant workers:** Under 'deeming' practices, migrant workers are deemed 'fit to work' at jobs in Ontario (such as gas station attendant) and taken off WSIB after they have been repatriated to home countries where no such jobs exist. Deeming practices for workers abroad must be stopped. The government should commit to working with migrant workers and their advocates to determine how best to update the Workplace Safety and Insurance Act (WSIA) to provide fair and appropriate Loss of Earning benefits for migrant workers. Migrant workers must also be able to access retraining programs that are available to other Ontario workers. These changes should be part of a broader effort to ensure portable social benefits for all migrant workers with precarious or permanently temporary status.
- e) **Access to health services:** All migrants should be granted access to health services regardless of their immigration status. Eliminate the three-month waiting period that serves as a key barrier to ensuring public health standards are met for migrant workers. Migrant workers are facing unreasonable delays in getting their applications for health status processed even after the three-month period, sometimes waiting the entire length of their contract to receive healthcare. Regulations to ensure consistent and timely access, i.e. immediate access to health care, must be developed for migrant workers, particularly those that are forced to leave abusive employers, fall out of status, or are in between work permits or employers. Though federal law does not deny healthcare on the basis of immigration status, provincial legislation does. While workers are able to access life-saving and emergency services at cost, they can't access preventative care, leading to greater financial burden on public services and public health concerns.



- f) **Ontario Works (OW) and Ontario Disability Support Program (ODSP):** Many workers that are unable to access WSIB because of deeming or other barriers turn to ODSP for support. However, OW and ODSP are based on residency in Ontario, which effectively bars migrant workers while they are trying to regularize their status or have been repatriated. As with WSIB and EI, inclusion under OW and ODSP should be a priority to ensure that migrant workers receive the full social wage and portable social benefits even after leaving Canada. Immigration status as a barrier to accessing OW and ODSP should be removed.

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