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## Islands of isolation in a modern metropolis: Social structures and the geography of social exclusion in Toronto, Ontario, Canada

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### *Abstract*

In response to a request from a local community health centre, an inquiry was undertaken into the service needs and day-to-day lives of residents in five social housing complexes in the inner suburbs of Etobicoke, Toronto. Unlike other low-income communities embedded within larger wealthier communities, these complexes have little in the way of health care, social service, or recreational facilities. Focus groups revealed that anticipated issues of difficulty in accessing primary health care services, limited access to support services, and lack of recreational opportunities for youth were intensified by gentrification of neighbourhoods, ongoing experiences of racism and discrimination, a dearth of occupational opportunities for youth and political invisibility of these residents. These experiences of social exclusion are especially troubling when contrasted with the opportunities for health and well-being offered to many others in one of Canada's wealthiest urban communities.

**Keywords:** social exclusion; racialization; discrimination; Toronto, Canada; neoliberal cities; health inequalities; social deprivation

### *Résumé*

En réponse à une demande d'un centre de santé communautaire local, une enquête a été entreprise sur les besoins en services et la vie quotidienne de résidents de cinq complexes de logements sociaux dans la banlieue intérieure d'Etobicoke, à Toronto. Contrairement à d'autres communautés à faible revenu intégrées dans des communautés

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plus grandes et plus riches, ces complexes ont peu de soins de santé, services sociaux ou d'installations récréatives. Les groupes de discussion ont révélés que les problèmes anticipés de difficultés d'accès aux services de soin de santé primaires, d'accès limité aux services de soutien et de manque d'opportunités récréatives pour les jeunes étaient intensifiés par l'embourgeoisement des quartiers, les expériences continues de racisme et de discriminations, le manque d'opportunités professionnelles pour les jeunes et l'invisibilité politique de ces résidents. Ces expériences d'exclusion sociale sont particulièrement troublantes lorsqu'elles sont mises en contraste avec les opportunités de santé et de bien-être offertes à beaucoup d'autres dans l'une des communautés urbaines les plus riches au Canada.

Mots-clés : exclusion sociale; « racialisation »; discrimination; Toronto, Canada; villes néolibérales; inégalités de soin santé

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## Introduction

LAMP Community Health Centre (LCHC) has served residents of South Etobicoke for close to four decades by providing a range of clinical health services and community-based health programs focused on early childhood development, youth services, adult learning, and health promotion (LCHC 2020). In recent years it has been called upon to expand into adjacent geographical areas where such services are lacking. The Willowridge, Mabelle, East Mall, West Mall, and Capri Toronto Housing Community (social) housing complexes in Etobicoke are such areas where residents are assumed to be experiencing poverty, difficulty in accessing primary health care and other support services, and limited opportunities for youth recreation and employment.

Residents in these housing complexes are predominantly low-income recent immigrants and others of colour whose rental housing is surrounded by white middle-class owned housing. This is also the case for other low-income communities living in social housing in Toronto, but in these other instances, these communities have local agencies such as community health centres, recreational centres, and other social services (Raphael, Renwick, Brown, Steinmetz, et al. 2001, Raphael, Renwick, Brown, Phillips, et al. 2001). No such services exist for these housing complexes. In addition, the area in which these housing complexes are located, Central Etobicoke, is considered affluent, such that the needs of marginalized populations in the area are overlooked. It is also problematic that these areas are represented by conservative city and liberal provincial and federal politicians. In other low-income areas in Toronto representation is often by “left” politicians associated with the social democratic New Democratic Party.

Because of the wide range of issues facing residents in this part of the LCHC catchment area, LCHC asked us to conduct a community assessment of perceived needs of community members. Specifically, LCHC asked us to consult with the community around these issues by asking four questions:

1. What are the current needs of the community and where do the residents believe the priorities should be?
2. Where are the gaps in services and programs that if filled, would improve quality of life?
3. What are the barriers that inhibit residents from being able to access necessary services and programs?
4. Do the residents feel they have a voice in influencing policy decisions that impact on their neighbourhood?

From our perspective, the inquiry was informed—i.e. sensitizing concepts were suggested—by a model of social exclusion developed by the Wellesley Institute in Toronto which focused on: a) participation in social, cultural, and recreational activities; b) social support in the community; c) access to social networks; and d) involvement in local decision-making (Aery 2019). We quickly discovered the importance of a range of additional issues related to structural aspects of the neoliberal city: spatial isolation of low-income residents in an affluent area; gentrification and its effects on access to amenities; the experience of racism; and political indifference by conservative politicians. While inquiries had been previously made into the experiences of marginalized communities of colour in Toronto, we found these isolated housing complexes embedded within areas of influence to present a unique and previously unexamined situation.

## Background

### Community health centres

Community Health Centres (CHCs) are non-profit entities that provide primary health care and health promotion programs for individuals, families and communities (MOHLTC 2019). The Province of Ontario funds 101 CHCs which predominantly operate in lower-income neighbourhoods where marginalized populations are concentrated (Collins, Resendes, and Dunn 2014). CHC primary care teams consist of a variety of practitioners including physicians, nurses, social workers, health promoters, and dietitians. Health promotion teams add community health workers to these professionals (MOHLTC 2019).

CHCs' health promotion activities aim to build community capacity to enable community members to influence the social determinants of health by working with schools, workplaces, and housing authorities (MOHLTC 2019). The LCHC, for example, engages in advocacy aimed at addressing systemic and structural barriers to health, including poverty and racism (LCHC 2021a). Activities usually include community kitchens, employment and family counselling, pre- and post-natal support as well as drop-in centres. These activities and others aim to help "build the capacity of the community to improve its general health" (MOHLTC 2019). Youth services and programs—involving recreation, counselling, and career planning, are also offered by CHCs which vary based on local needs.

CHC's attempts to promote health are embedded within specific economic, political, and social contexts particular to neighbourhood, cities, provinces and the national scene (Fursova 2018; 2020). Our study came to identify many of these contextual issues which affect the health and well-being of the community members with which we interacted with in this study.

### Social exclusion in Toronto

Social exclusion refers to the societal processes by which certain groups are systematically denied the opportunity to participate in a variety of activities (Galabuzi 2016). Social exclusion has been the focus of intensive public policy activity in Europe since the 1980s (Madanipour, Cars, and Allen 1998), but less so in Canada. The importance of social exclusion flows from evidence of its corrosive effects upon physical and mental health and its contribution to numerous social problems.

According to Percy-Smith (2000), definitions of social exclusion usually include some or all of these elements:

- a) a focus on disadvantage in social, economic, or political activity by individuals, households, spatial areas, or groups;
- b) an identification of the social, economic, and institutional processes by which this disadvantage comes about; and
- c) a consideration of the outcomes or consequences of exclusion for individuals, groups, and communities.

White (1998) identifies four key types of social exclusion. The first occurs as a result of legal sanction or other institutional mechanisms. This may involve laws preventing non-status residents or migrants from participating in a variety of societal activities. It also includes systemic forms of discrimination based on income, race/ethnicity, gender, or disability, among other factors. The second form is the denial of social goods such as health care, education, housing, income, and language services by means of discrimination. The third type is exclusion from social production. This involves a denial of the opportunity to participate and contribute to social and cultural activities. The fourth type is economic exclusion, whereby individuals cannot access economic resources and opportunities such as participation in paid work. While we expected to find evidence of these forms of social exclusion, we were open to seeing other forms of exclusion unique to these communities.

### Related work in Toronto

Research on the social exclusion of communities in Toronto have focused on the experiences of racialized residents—especially youth—in neighbourhoods, housing, schools, the justice systems and the employment market. The general findings from these studies is that racialized individuals are at risk for numerous adverse outcomes. These include higher rates of poverty and food insecurity (Dhunna and Tarasuk 2020), greater unemployment and low-paid employment (Premji and Shakya 2017), barriers to attaining adequate housing (Teixeira 2008), educational

underachievement (James and Turner 2017), discrimination in the labour market (Branker 2017), disproportionate contact with the police and justice system (Meng, Giwa, and Anucha 2015), and continued experiences of racial inequalities (Bonilla-Silva 2015; Omi and Winant 2014).

The experiences of racialized youth in Toronto have been summarized as involving social exclusion shaped by living in poverty and lacking in financial resources, differential treatment in school settings, and discrimination due to racism in the workplace (Aery 2019). Especially important is spatial isolation: “Racialized youth living in the suburbs may have less access to diverse arts, sports and cultural programming” (Aery 2019, 3). In essence, neighbourhoods in which these youth reside provide few opportunities for participation and engagement.

Finally, urban poverty in Toronto has shifted from the downtown inner city to the inner suburbs of North York, Scarborough and Etobicoke (Ades, Apparicio, and Séguin 2016). In the 1970s a majority of low-income neighbourhoods in Toronto were located in downtown inner-city areas, which had access to essential services such as hospitals, community health centres and social service agencies as well as transit routes serviced by subways and streetcars. Today, low-income households are located primarily in the inner suburbs, particularly in the north-eastern and north-western corners of Toronto, where services are harder to access (Hulchanski 2010) and transit is limited to overcrowded bus routes. The housing complexes in this study are not in these areas of concentrated low income but do share the lack of services and public transportation common to these areas. Indeed, the built environment of these inner suburbs presents additional challenges to low-income residents as there are less resources available to meet increased need for mental health services, childcare and employment services (Allard, Tolman, and Rosen 2003, Ades, Apparicio, and Séguin 2016).

### Unique situation of these housing complexes in Etobicoke

The unique aspect of these five housing complexes is their embeddedness in specific socio-demographic areas in Central Etobicoke’s Wards 3, 4, and 5 of the City of Toronto. This area is a sprawling inner suburb with rather low densities. In addition, residents of these housing complexes are typically low income and from racialized populations, with many being recent immigrants. This socio-demographic profile is in stark contrast to the surrounding areas

**Table 1**

Characteristics of Wards in which the Housing Complexes are Found

	Ward 3	Ward 4	Ward 5	Toronto
Population	53,190	56,090	70,350	2,731,571
Density (people/hectare)	31	33	29	43
Owners/Renters Ratio	71/29	58/42	63/27	53/47
Average Annual Household Income (\$)	110,440	141,783	126,802	102,721
Low Income Rate (%)	12.3	13.2	12.8	20.2
Visible Minorities (%)	28	31	28	51
Immigrants to Canada (%)	43	42	39	47

Source: City of Toronto (2020). 44-Ward Model (2014-2018). <https://www.toronto.ca/city-government/data-research-maps/neighbourhoods-communities/ward-profiles/44-ward-model/>

which are primarily white middle-class homeowners. Table 1 shows defining characteristics of these wards in relation to the City of Toronto as gathered in the 2016 Canadian Census.

The above data confirms the impression that LCHC provided to us concerning these areas. As compared to Toronto as a whole, these areas have lower densities, greater proportions of owner-housing, higher average household incomes and lower low-income rates, fewer immigrants, and smaller proportions of visible minority populations. Those living in these social housing complexes are therefore embedded in relatively wealthier, non-visible minority, homeowner areas. These areas have few amenities with supermarkets usually located in strip malls that require significant walks for those without automobiles. There are no nearby cinemas, city recreation centres, or community health centres.

### The Politics of Etobicoke and Toronto City Council

At the time this study was done (spring of 2017) Toronto City Council consisted of 44 elected members. Two of these housing complexes were located in City Ward 3, two in City Ward 4, and one in the northern edge of Ward 5. These areas were represented by very conservative councillors (there are no explicit party affiliations at the municipal level) who consistently voted against expanding city services (Keil 2017). The provincial and federal ridings were represented by Liberal or Conservative Party representatives. In contrast, many other low-income housing complexes are found in areas represented by New Democratic (social democratic) politicians who have brought expanded city services to these areas. The mayor of Toronto at the time of study, who is still mayor, John Tory, is considered a “Red Tory<sup>1</sup>.” These aspects of representation have not changed since the time of the study.

It was suggested to us that all of these issues come together to produce a profound experience of social exclusion for these racialized residents that includes lack of health and social services, recreational and occupational opportunities for youth, and indifference by their elected representatives in regard to these issues. While previous research has identified aspects of social exclusion amongst racialized groups in Toronto, the situation of living in isolated housing complexes in the inner suburbs had gone unstudied. We were not able to find any research literature that focused on the needs of residents in such a situation in Toronto or for that matter across Canada. We had reason to believe that such an inquiry would provide unique insights into socio-spatial aspects of social exclusion in the neoliberal city (Viswanathan 2010). As shown in later sections, this appears to be the case.

### Methodology

Authors Bryant and Raphael were initially approached by a LCHC manager to solicit feedback from community members, services providers and elected representatives on the needs of these communities and how LCHC could help to meet these. We used the questions provided by LCHC staff which were developed in consultation with LCHC community workers. These were:

1. What are the current needs of the community and where do the residents believe the priorities should be?
2. Where are the gaps in services and programs that if filled, would improve quality of life?
3. What are the barriers that inhibit residents from being able to access necessary services and programs?
4. Do the residents feel they have a voice in influencing policy decisions that impact on their neighbourhood?

Community outreach workers at the LCHC organized three focus groups comprised of residents in these five housing complexes. Contacted participants in turn recruited other participants (i.e. snowball technique). Each focus group was a natural grouping, in that a majority of participants were already familiar with one another (Leask, Hawe, and Chapman 2001).

The first focus group consisted of 10 adult women of colour, most of whom were immigrants to Canada and took place in a local high school. The second focus group consisted of participants from the youth-driven program RAY, affiliated with LCHC, which provides recreational opportunities at a local high school where the focus group took place. Participants in this focus group consisted of seven female and three male high school students of colour. Although the exact demographic breakdown of study participants was not collected, youth in the RAY program are between 13–24 years of age (LCHC 2021b). The third and final focus group took place at the LCHC office in Southern Etobicoke and comprised 12 university graduates, university attendees, and a few



few high school students. Ten were female and two were male.

At this point, staff changes at LCHC disrupted the study such that LCHC was unable to continue participation in the project and the plan to obtain feedback from services providers and elected representatives was cancelled. Since continuing the needs assessment was no longer feasible, we made the decision to convert the project into a more academically inclined research inquiry into issues of social exclusion and the economic, political, and social forces that were driving it in these marginalized communities. With that said, a copy of the draft article was welcomed by LCHC which intends to disseminate it to staff and stakeholders.

Focus group transcripts were transcribed and subsequently coded and analysed using thematic analysis (Braun and Clarke 2006). The first three authors of this manuscript each reviewed transcripts and identified initial themes. All authors then reviewed – and through extensive discussion—refined a final template of themes and subthemes.

## Findings and discussion

The initial focus of this research was on the needs of residents to assist LCHC in its outreach activities; the focus groups identify many of these: lack of services and amenities, marginalization within larger local communities, and inadequate transit. We also identified a range of additional issues related to structural aspects of the neoliberal city: spatial isolation of low-income residents in an affluent area; gentrification and its effects on amenities; political indifference of elected representatives and the experience of racism and discrimination.

We confirmed the lack of access to food markets, youth recreation, entertainment, housing, education, transportation and health services. In addition, participants described their neighbourhoods as predominantly white and middle-class such that others had the means to access these amenities, but they themselves did not. They saw themselves as being without the political voice and social connections possessed by others in their neighbourhoods:

And this is a huge area, when you look at it it's a rich middle-class area and tends to forget the poor class of people in this area. (Gr1, P1)

### Health and social services

The lack of health and social services in these areas was consistent with LCHC's impression of these areas. Additionally, the situation has become more acute due to redevelopment of the local area, where medical services were replaced with condominiums. As discussed by the members of the women's focus group:

Look at the infrastructure in this neighbourhood. Where George Hull is now, there used to be a medical clinic that was very accessible. (Gr1, P1)

(In unison): The whole plaza over there is gone! (Gr1, P1, 2, 4)

They're building condos. So, there's no services in this area. (Gr1, P12)

At the end of the East Mall, there used to be a medical centre, now that's gone. (Gr1, P1)

It was a [medical] laboratory, a lot of seniors used to use it. (Gr1, P2)

Interestingly, despite the presence of the George Hull Centre for Children and Youth, a traditional psychiatric mental health centre in the area, it was spoken of only in terms of its displacing previously available medical services. The women desired a multi-service agency with a legal clinic, drop-in medical clinic, sex-education resources and child care. A community health centre would meet most of these needs.

The younger youth focus group expressed a need for mental health services as many community members were immigrants and refugees with trauma stemming from war and societal unrest, as well as gun violence:

I feel a lot of people in the community would benefit from something like that [community health centre]. Especially, people that have experienced traumatic things. Everyone in the area might have experienced gun violence; people have lost friends and family to gun violence. So, I don't think there is anything in place for mental health issues or anything to console people and a lot of people come from war-torn countries. So a lot of them could be experiencing post-traumatic stress. But there isn't anything in place where they can go and talk to someone. (Gr2, P3)

A university student in the second youth focus group reinforced the need for mental health services:

They experienced violence firsthand, a country war-torn. Some of them have faced colonialism, some of them have faced the whole process of migration. That was really, really difficult. And when they came to Canada, they never had the opportunity to contemplate it themselves, what they went through, what the process did. Because the minute they got here they had to worry about 'how am I going to feed my eight children', 'how am I going to take care of my children'. Like, the only chance I've had to talk to my parents about that experience is when I am doing my school studies and I was like 'hey did you guys really face this? Did you guys really go through this?'. And my mum would explain to me the whole refugee process -- travelling here, travelling there -- with this many children. (Gr2, P1)

This is certainly consistent with the literature on the health care and mental health needs of many immigrants and refugees to Canada (Thomson et al. 2015; George et al. 2015; Guruge and Butt 2015). The lack of services available to these housing complex residents makes these issues especially important.

### Transportation

Transportation was a key concern across all three focus groups. Transportation services were described as slow, infrequent and a major barrier for accessing essential goods such as food, recreation and entertainment:

Access to affordable groceries. It depends on where you live. If you go to the No Frills on Rathburn, it's kind of awkward because of how that bus runs. The East Mall bus runs frequently, but the four-day Rathburn bus does not. Sometimes that bus runs every 15 minutes, and on the weekends, it's every half an hour. So you have to time it. Or walk or take a cab. Which means the money that I use on the cab both ways could have gone towards groceries. And the other grocery store within walking distance, the Loblaws is more expensive. (Gr1, P2)

As this quote details, inadequate transit increased the risk of food insecurity. While an "excellent food bank" was nearby, affordable and culturally appropriate food was difficult to access due to the lack of adequate public transit. This is consistent with findings that racialized youth in inner Toronto suburbs have difficulty accessing transit (Hertel, Keil, and Collens 2016, Basu and Fiedler 2017).

The East and West Mall housing complexes where some of the participants lived are bisected by a major highway which limits mobility, and this is especially the case for children:

It's hard for the small kids. We live in the West Mall, and we have to take three buses to come here [the public school]. You have to cross the highway and it's dangerous. (Gr1, P3)

The lack of amenities and services coupled with poor public transportation intensified by strip malls being converted to condominiums created feelings of physical and social isolation. Said one youth about the area: "It's like a dead end, to be honest with you." (Gr3, P3)

### Housing and education

The lack of affordable housing and the quality of the available housing were concerns as was school infrastructure. Regarding neglect in the upkeep of their Toronto Community Housing, one woman said:

I had a flood, when we had the big rain storm a couple of years ago, so now finally I get the guy to bring the meter in for four days to read the air because I now have three generations that have asthma and allergies. (Gr1, P4)

Another major concern with community housing was overcrowding: “You have adult kids living with their parents. How can you have four, five, adult kids living with their parents in a two bedroom? That’s unreal.” (Gr1, P1)

The women described their children’s schools as neglected, underfunded, and in need of repair:

The schools need to be fixed, this school right here caught on fire... They even sent a notice one day that it’s going to be smelling like tar, so now my son is smelling tar all day in his classes. Those two schools need upgrades. They need upgrades. (Gr1, P2)

Furthermore, they were unable to send their children on school trips as there were no subsidies to support families of lower income. One youth stated:

It’s not even just about trips, you know? Like trips are an advantage but there are already people out here fearing for their lives. Trip is just an extra. The basics aren’t even there. (Gr2, P4)

Thus, the findings above clearly illuminate issues pertaining to both housing and education. In relation to housing, Toronto is facing an affordability crisis where the average price for a one-bedroom apartment is over \$2,300 per month. The lack of affordable housing in Toronto and the inadequate upkeep of Toronto Community Housing is well documented, and in 2019 had a repair backlog of \$1.6 billion (McLaughlin 2019). The Toronto District School Board has a repair backlog of \$3.5 billion (Toronto District School Board 2019). Moreover, in a recent report by People for Education (2018) it has been noted that schools in poorer neighbourhoods are likely to have less before and after school programs. This can consequently amplify young people’s exposure to risks within their communities e.g. violence and negatively affect learning opportunities and future opportunities.

### Opportunities for youth

Recreation opportunities for youth were described as severely under-resourced. Even minimal infrastructure such as basketball nets or courts were few and far between. The few recreation centres in the community, including LCHC, were over-capacity and had limited hours. Local schools provided limited space at their gyms are often rented to outside groups and other agencies. One youth stated:

[...] For me, I literally have to travel sometimes downtown [...] Lakeshore, like far places. I have to bus all the way down there, waste time, like there is nothing really in my area where I can play basketball. (Gr3, P2)

A centrally located space, open on weekdays and weekends, for all age groups (e.g. children and seniors) that could provide recreation activities such as fitness, cooking, and others was called for. More importantly, it would provide a place where they could feel safe, included, and have their voices heard.

Support for youth empowerment was heard. There was a desire to see entrepreneurship programs and mentorship programs with career supporting opportunities to network, volunteer and intern. These programs could assist with developing job interview skills and resume writing.

[...] things that I would personally like to see in a community hub is the normal standard recreation like, fitness, fitness programs, cooking programs, homework programs. But also, things like leadership, entrepreneurship, like there are many youth that have many great ideas [...] I work with youth every day and they have great ideas, right? It’s just who do they go to? (Gr2, P4)

In 2017, the Ontario government announced \$47 million in new funding to support career development for Black youth (Jingco 2017). The impact of this funding, however, has yet to be determined.



## Political representation and political indifference

We asked participants about having a voice that allowed them to influence policy decisions that impact their neighbourhood. A majority of the respondents, and this was especially the case for the youth, felt they did not have a voice; when they did express concerns, they were ignored:

[...] just to add on, this is not our first focus group we'll tell you that, it's not the first time there has been a bunch of people talking about issues, right? We have a voice, but it's just, I guess [...] (Gr3, P5)

No one wants to listen. (Gr3, P3)

[Politicians] disappear the minute we have helped them. (Gr3, P1)

The area we live in is considered a swing vote area so most politicians need our area. So, right before elections you name it, every politician 'we're here' - they show their faces. As soon as you get elected and the job done [open hands] (Gr3, P3)

A bunch of empty promises. (Gr3, P8)

The youth focus group distinguished between having voice and having the power to have the voice heard. As one youth said "[...] our voices will never be heard unless they're in places of power." (Gr2, P3). This is unlikely for them as they did not "have the job positions" to influence policies to benefit their lives. When asked how they would like to have their voice heard, one respondent said:

Putting people with our experiences in the right positions. With people that identify like us and our struggle, people that have actually lived these experiences, put them in places of power. (Gr3, P3)

Some youth were actively engaged in "build[ing] up future community hubs for central Etobicoke" (Gr2, P4) others expressed a desire to empower themselves and their community:

[...] We keep talking about our voices being heard but we are going to have to be the ones who make our voices heard [...] (Gr2, P1)

Some participants in the women's focus group indicated that they had in the past participated in various committees. These committees were not seen as useful in effecting change:

... They say 'oh, we heard that 10 years ago, we heard that 15 years ago, oh you're running that committee...' (Gr1, P4)

You only get lip service. (Facilitator) Exactly.

When we see it, we'll believe it. (Gr1, P4).

In summary, we confirmed a lack of services and numerous barriers to accessing those that existed. We also heard about additional topics that led us to consider broader concepts from the urban geography literature; particularly, socio- and spatial-exclusion, racialization and discrimination, gentrification, and governance of the neoliberal city.

## Discrimination and the exaggeration of social isolation

### Exclusion within and outside neighbourhoods

Participants shared stories of social exclusion and discrimination due to race, class and religion. The exclusionary processes commented upon had clear spatial dimensions. Participants expressed feelings of exclusion and discrimination within both their local neighbourhood and when accessing services within and outside these

locations. These situations included community institutions e.g. schools, grocery stores, banks, and so on. For instance, youths described their parents being treated rudely by landlords and social assistance workers, likely because of their dress or accents:

“[...] Like I’ve gone to the bank, or a grocery store, or even just paying the rent in the building where we have lived for over 10 years and they treat our parents as if they are irrelevant. Like the same answer they would never give to me they give to our parents -- which is very disrespectful [...]. So, I think the same respect that some of us get because of the way we are speaking, the way we are communicating, the way we look -- they don’t get that.” (Gr2, P2)

This assertion that a person’s accent or non-western attire leads to discriminatory behaviour reflects processes of racialization and classism. Additionally, it illuminates the varying locations within which exclusion takes place. Moreover, these experiences of social exclusion compound past traumas. This is clearly articulated by a participant’s comments regarding her parent’s past:

I think our parents have been neglected entirely. From the entire system. Because the way they had to face a different type of struggle to actually come here. They experienced violence first hand, a country war-torn. Some of them have faced colonialism, some of them have faced the whole process of migration. That was really, really difficult. [...] (Gr2, P1)

Exclusionary and discriminatory practices were experienced by the young people themselves. One participant notes:

So, the way I may have been treated is different from the way he or she may have been treated [points to another group participant] because I never wore a head scarf, you know what I mean? So, I was treated with kindness and I was treated like I could be whatever I wanted to be. But when a girl wears a headscarf, I mean I’ve seen the way my peers in my neighbourhood have been treated. And the scary thing is that that is the high school in our neighbourhood so we don’t have an option to go anywhere else. So, it comes down to our neighbourhood, we’re stuck. We’re a group of minorities, that are black, that are Muslim, that are stuck in a white and rich neighbourhood where its only white kids, its only white people. (Gr2, P3)

These feelings of exclusion are exacerbated by the dominant features of their local neighbourhood—wealthy and white—and the feelings of helplessness and non-belonging that this engenders. Thus, there are clear consequences of social segregation and social exclusion within a neighbourhood setting. Yet, as noted, the experience of exclusion is not limited to their place of residence but also occurs in a number of social and institutional settings. Within schools, youth described guidance counsellors actively discouraging them from enrolling in the academic courses necessary for attending University:

[...] Like I remember the guidance counsellors would be like ‘oh college is a better idea, I think college would be a better thing to do’. I remember I told her that I wanted to do nursing and she was like “plumbers pay a lot of money” (Gr2, P3). In another instance, another participant said “[...] I got my acceptance letter [for University] and I went to my guidance counsellors just to discuss some other matters. And she said ‘oh maybe you should try college’. I was looking at her like ‘you need to learn how to do your job because I’ve already got my acceptance letter for university’, and she’s still telling me ‘don’t go, you’re college bound’ (Gr2, P8).

As a result, students felt they had to work hard to prove their merit compared to white students:

[...] I feel that I have to, like really go above and beyond to show them that I wasn’t that typical, you know, it’s sad to say but that black kid you see in the neighbourhood, you know? That I am actually articulate, and I am smart and I can do something with myself [...] (Gr2, P4)

A mother in the women's focus group expressed her feelings with witnessing this discrimination:

You know what I find they're encouraging the kids to take applied courses, they don't encourage them to take the academic. As a parent if you go and advocate for that you're seen as ignorant, mean, hostile, you're not seen as a passionate parent that wants something better. It's like oh just ignorant black people coming in here. You're ignorant, you're hostile, you're angry. So even when you go to the schools, you still can't advocate. (Gr1, P2)

Directing students into a particular program of study, or 'ability grouping' is criticized for entrenching inequalities by exacerbating gaps in educational achievement (People for Education 2013). Black youth in Toronto schools are twice as likely to take 'applied', and three times as likely to take 'essential' courses rather than 'academic' courses, the latter of which prepare students for university (James and Turner 2017). Students in the applied and essential streams have a reduced chance of attending post-secondary school and are less likely to graduate high school, further exacerbating social and economic inequities (James and Turner 2017; People for Education 2013). Black youth are also overrepresented among those suspended or expelled from secondary school. All of this leads to greater likelihood of unemployment and precarious work (Briggs 2018).

One means of responding to these issues would be increasing representation in the community through hiring of teachers, guidance counsellors and social workers with racialized backgrounds. As one of the women said "In the schools in the area, we need more diversity within the teachers at these schools." (Gr1, P1). Youth also felt that representation was important. One youth in grade 8 stated:

[...] Like there's not a lot of black people at our school. It's mostly like Eastern European, uh white, and we feel like we're not really represented. And like here [LCHC] is the only real place we feel like 'oh uh, this person looks like me so I can talk to this person.'[...] (Gr3, P1)

### Employment and student debt

The youth described a lack of employment opportunities because of their geographic isolation (living far away from commercial areas such as a mall) as well as their age, gender and race. They saw themselves less able to compete for jobs due to lack of resources and networks. For example, the youth discussed not having the resources to hold an unpaid internship, nor did they have the networks which would help them access internships or other opportunities in the first place. The jobs available to these youths were described as being limited to temporary summer jobs, retail and fast food restaurant jobs. Job fairs, which would improve access to employment, were rarely organized in their neighbourhoods:

You don't get a lot of opportunities. You know? That's the only problem up here. That's it. If I got a job or was offered a job, I would take it. (Gr2, P5)

A female youth discussed how the employment discrimination faced by boys leads to social isolation and exclusion:

Things are a lot more different for and much more difficult for them [men]. Honestly, it's a lot more difficult for our males than it is for our females. [...] Whereas younger females we've had the opportunity to not seem like a threat when we go outside, to be able to talk to people, and meet new people, and engage with new people. Whereas for a lot of our boys, and stuff, they have been secluded. Secluded and isolated." (Gr2, P1)

They [boys] don't have the same opportunities that we do. I think it's a society thing, like girls are seen as less of a threat, you have a pretty face so you can go out and get any job you want, do whatever you want. Like jobs that were easier for us to get...like when I was their age, I was getting jobs left, right, and centre. (Gr2, P3)

Findings are consistent with earlier work of how racialized people and immigrants have higher rates of unemployment in Toronto facilitated by a lack of social networks, fewer opportunities, inadequate transportation, racism and

structural discrimination as barriers (Bramwell 2015). Despite the Province releasing the Ontario Youth Action Plan in 2012, that set out to address barriers to employment in minority, these do not appear to have affected the lives of our participants. Receiving a post-secondary education does not guarantee employment for youth either:

I did criminology as a major and I did sociology as a minor and women and gender studies as a minor. And most of us went to university, are going to university, have graduated university. And there's still no jobs. And it's a lack of representation of people that we identify as to help us get the jobs we need. Right? And the social capital we have, the majority of us come from low income families [...] (Gr2, P1)

Student debt added to the stress of these participants as youth who went to college or university discussed carrying high levels of debt and felt concerned both about not being able to find a job in their field, and about how they would repay their student loans.

[...] like most recent undergraduates start paying their loans right away but for us it's not like that. We have to pay our bills and our family's bills and things like that [...] (Gr2, P2)

[...] I remember there were times when [Ontario Student Assistance Program] OSAP wouldn't give me enough money for a semester so I couldn't take a class, or I had to drop a certain class [...] But now the biggest stress is that now your finished school, it's difficult to find a job, and you're in this debt. I have nightmares. (Gr2, P3)

Government support for students was also described as insufficient, with provincial student loans being unreliable and having numerous restrictions for eligibility. The lack of government support has only intensified since these focus groups were held. In 2019, the Provincial government made cuts to grants and loans for students (Ontario 2019) making it more difficult for youth across the province to attend school.

### Police presence and harassment

Police officers were a source of fear and exaggerated feelings of isolation and non-belonging among the participants. One participant gave this example:

[...] Even parents don't feel safe for their sons to be travelling out late by themselves after certain hours. Because there are a lot of issues with the police, right? (Gr2, P3)

One female youth commented upon the implications that discriminatory treatment has on the lives of youth, she said:

[...] in our neighbourhoods 14 and 15-year olds will actually have a criminal record. They'll be kicked out of their school and never be able to finish high school. And that's a really sad reality but not many people get to see that. [...] the [school] office will actually learn that one of the kids got into a fight, a black kid from our neighbourhood, outside of school hours and outside of school time and location but they will actually kick them out of the entire school. It's really sad the number of boys in my neighbourhood that actually have criminal records. For doing absolutely nothing. (Gr2, P1)

This quotation reflects the well documented experience of young black men at the hands of the authorities and the adverse effects of police harassment within these communities. A 2015 study found Black youth in Toronto were subject to more stops for drug-, traffic-, gun- and suspicious activity-related reasons compared to their white counterparts. Furthermore, these drug-related stops occurred most in predominantly white neighbourhoods, demonstrating race-and-place profiling (Meng, Giwa, and Anucha 2015). The consequential effects of increased policing of stigmatized neighbourhoods and individuals engender feelings of fear, social exclusion, isolation and non-belonging. Discriminatory police practices adversely affect future occupational prospects due to youth receiving a criminal record. Thus, social exclusion is spatially relevant and is experienced when individuals access services

or institutions—schools, grocery stores, banks—or have contact with institutional representatives—police officers, social assistant workers – within their neighbourhood.

### **Analysis: Social policy in the neoliberal city and its impact on social exclusion**

Our research is consistent with the Wellesley Institute's model of social exclusion (Aery 2019). Participants reported a lack of participation in social, cultural and recreational activities, limited access to social networks and social support in the community, little 'voice' in local decision-making, and the experience of geographical isolation. Our research adds the dimension to social exclusion of a lack of healthcare services, specifically mental health services for those who have experienced violence prior to immigrating to Canada or difficulties experienced once here.

There are other communities in Toronto that at first glance, appear similar to the situation seen in this study. Lawrence Heights, for example, is a low-income community in North York, Toronto that consists of low-income social housing with many residents of colour which is also embedded within a predominantly white owner-owned housing area. But in contrast to the Etobicoke communities examined in this study, Lawrence Heights residents were served by a community health centre, a recreation centre, a library, and numerous nearby social service agencies (Raphael, et al., 2001). Lawrence Heights is also served by a subway line that runs directly to numerous amenities. All of these public services are largely absent in these Etobicoke communities making the experience of social exclusion more intense.

The unmet community needs, the lack of political representation, and finally the experience of geographical isolation can be understood as occurring as a direct consequence of the consolidation of the neoliberal city and the process of 'uneven development' (Harvey 2006). In order to understand how these processes work in real time, however, we must first unpack these concepts.

The neoliberal city has been classified by Pinson and Journal (2016) as a "set of intellectual streams, policy orientation and regulatory arrangements that strive to extend market mechanisms, relations, discipline and ethos to an ever-expanding spectrum of spheres of social activities, and all this through relying on strong State intervention" (pg. 137). This quotation provides a succinct overview of the primary features and functions of the neoliberal city. Moreover, uneven development is a process whereby capital flows to areas of high profitability and ebbs away from those deemed unproductive. Consequently, when examining issues related to poor service provisioning—specifically relating to health and social services, transportation, housing and schools, opportunities for youth—one may argue that this is related to uneven development in a neoliberal city.

Key to understanding this process is the shift towards 'governance'. Governance here pertaining to the retraction of the state, the decentralization of responsibilities to civil society and non-governmental organizations and a heavy reliance upon the marketplace to provide services and goods (Brenner and Theodore 2002). It effectively empties out the role of the state of any directive power (Wood 1990). A clear example of this can be seen with social housing across Canada. As Hackworth and Moriah (2006) discuss, in the mid-1990s the federal government declared social housing to be no longer its responsibility (Hulchanski 2003) with the province of Ontario following suit a few years after. The Ontario government further defunded social housing, which halted the construction of nearly 17,000 units already in development and prevented any future developments (Hackworth and Moriah 2006). More recently, we can see how other projects are embedded within a larger neo-liberal project. Regent Park, Toronto's largest public housing project, began redevelopment and privatization in mid-2000s, displacing working-poor and immigrant residents, a majority of whom were people of colour, from the city's downtown. Kipfer and Petrunia (2009) suggest that the redevelopment project was "a multipronged, racialized strategy to recolonize a segregated and long-pathologized, but potentially valuable central city space in the name of diversity and social mixity" (p. 119).

According to the Toronto Community Housing website, the re-development project would result in 5,400 new market condominium units, and only 2,083 are replacement rent-g geared-to income units, and 399 are new affordable rental units (Toronto Community Housing Corporation 2021). As such, "public housing tenants are now projected to be a clear minority of the projected total population of 12,500, with about 2,000 of the existing residents no longer being able to return to their own neighbourhood" (Kipfer and Petrunia 2009, p.123).

The deleterious effect of this process and the subsequent exaggeration of social inequalities relating to ethnicity, gender and class have been noted (Harvey 2006; Schrecker and Bamba 2015). Thus, we see organizations such as LCHC filling the vacuum that was once the remit of local government. However, within a



fiscally conservative environment with limited resources it is difficult for organizations such as these to provide the holistic support required to their community members.

The political process of neoliberalism has a number of social effects, as noted above, which are spatially specific. Neoliberal cities have been termed 'gateway cities' as it is here that immigrants initially relocate. While these communities are not static and exhibit features of mobility there is a level of consistency which has allowed for the diversification of these locations and their designation as a gateway (Hou and Bourne 2006). This has consequently led to racialization being a fundamental process within the neoliberal city. For instance, Ghanaian immigrant youth describe experiencing socio-spatial exclusion living in the Jane and Finch neighbourhood of Toronto, a neighbourhood "often constructed by Torontonians to be located on the margins of Toronto society" (Zaami 2015, 73).

This socio-spatial exclusion that results in the negative labelling of their neighbourhood becomes a barrier to employment for youth (Zaami 2015) which further excludes and marginalizes these groups, reflecting contextual housing stigma (Horgan 2020). Additionally, the feeling of discrimination when accessing services, specifically health and or social care services, housing, educational environments, reinforces the feelings of non-belonging.

The experiences of social exclusion are amplified through the continual presence of the police and the subsequent harassment experienced by individuals within the community. A key feature of the neoliberal city is the role which the police play in safeguarding the needs of capital and controlling communities and individuals that have been branded 'undesirable'. While this is not a new phenomenon, it takes on a particular urgency within the neoliberal city (Davis 1990; Clement 2007). Samara (2010) states that within quasi-public neoliberal spaces, policing acts to remove undesirables from these locations, a process which perpetuates social segregation. It may be argued that the treatment of this racialized group, specifically the young men, within both the downtown core and their own communities reflects these trends. Thus, it may be argued that the implications of social exclusion and the policing of community boundaries clearly leads to pockets of the forgotten. These are the islands of isolation within the ever-expanding modern neoliberal metropolis.

There is a clear need for public policy leadership to address issues faced by racialized low-income residents in Toronto. Enacting these changes in Toronto, however, may be difficult as Toronto is a divided city "unable to address its urban problems" (Joy and Vogel 2015, p. 35) due largely to the rise of neoliberalism, economic globalization, as well as political restructuring (amalgamation). Political restructuring, which occurred in 1998 under Ontario Premier Mike Harris, and again in 2019 by Ontario Premier Doug Ford, shifted political dominance in City Hall towards conservative city councillors and "diluted immigrant voice" by reducing the number of contestable seats (Joy and Vogel 2015, 36). The result has been an entrenchment of sitting council members and a reduction in opportunities for racialized and immigrant citizens to participate in electoral politics and advocate on behalf of their now invisibilized communities.

As discussed by Galabuzi (2016), the structures and processes that generate social exclusion, including poverty, racism and discrimination, create and deepen social inequalities and health disparities. Racism and experiences of social discrimination directly cause psychological and physiological reactions that adversely impact both the mental and physical health of racialized groups, and even the internalization of unfavourable self-evaluations which then negatively impact psychological well-being (Hyman 2009; Krieger 2003). More specifically, racism increases risk for cardiovascular disease (Calvin et al. 2003), elevated blood pressure (Brondolo et al. 2003) and mental health problems (Paradies 2006; Pascoe and Smart Richman 2009; Williams and Williams-Morris 2000).

Additional mechanisms by which social exclusion negatively impacts health include effects of material deprivation, including lack of access to secure housing and reduced socioeconomic mobility (Williams and Williams-Morris 2000). Like other determinants of health, addressing social exclusion requires structural change. Providing access to much needed social and health resources, including medical clinics and mental health services, as well as improving transit is crucial. For instance, as the women's group discussed, a community health centre that includes legal support, drop-in medical clinic, sex-education resources and child care would be of great use. However, while such a multi-service agency would meet most of these needs, a failure to address the root causes of social exclusion, notably structural and every-day racism and discrimination, by all levels of government will further perpetuate the negative health trajectories experienced by this community. Reforming institutions such as the police, education and health-care systems is also essential, topics that have come to greater public attention as a result of the COVID-19 pandemic and the Black Lives Matter movement.

In conclusion, the situation of community members in these marginalized communities described in this paper illustrates the effects of the interaction of numerous exclusion-producing forces. Community members already marginalized by virtue of their low income and racialized status are placed in a broader environment where their otherness is magnified through their embeddedness within surrounding affluence, whiteness, and owner-housed areas.

The contrasting racial composition of these communities and their effects directs attention to the contribution of critical white studies which suggests that “whiteness” serves as a means of maintaining power of the dominant group as well as marginalizing those who are not white (Levine-Rasky 2016). It suggests that the contrast between white middle-classness of the larger community and racialized outsider status of these communities contributes at a variety of levels, individual, community, and structural to exclusion that these community members are experiencing. The general affluence—and whiteness—of the broader area makes the provision of services less likely, and the local governing authorities—conservative city councillors—indicate little willingness to respond to their needs. The broader processes of gentrification remove what services had been available and increases the contrasts between these communities and their surrounding areas.

It should be noted that since the completion of the study, LCHC has not received any additional funding for youth programs or other outreach programs. Rather, the space provided in the local high school was reclaimed by the Toronto District School Board, displacing the RAY youth program. The LCHC has indicated they are in the process of finding a new space, but there is currently little availability in the area.

Finally, the authors would like to acknowledge their positionality as researchers. Four of us are from white middle class backgrounds. Our positionality may have affected the way we have interpreted our findings and the conclusions we reached. Note we were approached by LCHC since our previous work with marginalized communities was known to staff—including previous cooperative work with LCHC—and LCHC felt that we would sympathetically and accurately convey the views of community members. Nevertheless, recognizing this positionality we have attempted to accurately portray what we heard—providing many excerpts from our interviews and been explicit about our theoretical orientations by which we explain our findings. We hope readers will agree that we have accomplished this goal and accurately portrayed the experiences of our participants.

## Notes:

<sup>1</sup>A Red Tory is a conservative who maintains social values of the aristocracy such as noblesse oblige (the moral obligation of the rich to act generously). Red Tories see themselves as fiscally conservative and socially progressive (Wesley 2006).

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## References:

- Ades, J., P. Apparicio, and A-M. Séguin. 2016. Is poverty concentration expanding to the suburbs? Analyzing the intra-metropolitan poverty distribution and its change in Montreal, Toronto and Vancouver. *Canadian Journal of Regional Science/Revue canadienne des sciences régionales* 39(1/3): 23–37.
- Aery, A. 2019. *Inclusive cities and the experiences of racialized youth*. Toronto, ON: Wellesley Institute.
- Allard, S. W., R. M. Tolman, and D. Rosen. 2003. Proximity to service providers and service utilization among welfare recipients: The interaction of place and race. *Journal of Policy Analysis Management* 22(4): 599–613.
- Basu, R., and R. Fiedler. 2017. Integrative multiplicity through suburban realities: Exploring diversity through public spaces in Scarborough. *Urban Geography* 38(1): 25–46.
- Bonilla-Silva, E. 2015. *The structure of racism in color-blind “post-racial” America*. Los Angeles, CA: Sage Publications Sage CA.
- Branker, R. R. 2017. Labour market discrimination: The lived experiences of English-speaking Caribbean immigrants in Toronto. *Journal of International Migration and Integration* 18(1): 203–222.
- Braun, V., and V. Clarke. 2006. Using thematic analysis in psychology. *Qualitative Research in Psychology* 3(2): 77–101.

- Brenner, N., and N. Theodore. 2002. Cities and the geographies of “actually existing neoliberalism.” *Antipode* 34(3): 349–379.
- Briggs, A. 2018. Second generation Caribbean black male youths discuss obstacles to educational and employment opportunities: A critical race counter-narrative analysis. *Journal of Youth Studies* 21(4): 533–549.
- Bramwell, A. 2015. Who speaks for Toronto?: Collaborative governance in the Civic Action Alliance. In *Collaborative governance regimes* (Chapter 5), ed. K. Emerson, and T. Nabatchi. Georgetown, DC: Georgetown University Press, 95–119.
- Brondolo, E., R. Ricardo, P. K. Kim, and G. William. 2003. Perceived racism and blood pressure: A review of the literature and conceptual and methodological critique. *Annals of Behavioral Medicine* 25(1): 55–65.
- Calvin, R., K. Winters, S. B. Wyatt, D. R. Williams, F. C. Henderson, and E. R. Walker. 2003. Racism and cardiovascular disease in African Americans. *The American Journal of the Medical Sciences* 325(6): 315–331.
- Clement, M. 2007. Bristol: ‘Civilising’ the inner city. *Race & Class* 48(4): 97–105.
- Collins, P. A., S. J. Resendes, and J. R. Dunn. 2014. The untold story: Examining Ontario’s community health centres’ initiatives to address upstream determinants of health. *Healthcare Policy* 10(1): 14.
- Davis, M.. 1990. *City of quartz: Excavating the future in Los Angeles*. Verso Books.
- Dhunna, S., and V. Tarasuk. 2020. *Black-white racial disparities in household food insecurity from 2005–2014*. Preprint available at <https://www.researchsquare.com/article/rs-37839/v1>.
- Fursova, J. 2018. The ‘business of community development’ and the right to the city: Reflections on the neoliberalization processes in urban community development. *Community Development Journal* 53(1): 119–135.
- Fursova, J. 2020. Stepping up the ladder: Reflecting on the role of non-profit organisations in supporting community participation. In *Research handbook on community development*. Cheltenham, UK: Edward Elgar Publishing.
- Galabuzi, G. E. 2016. Social exclusion. In *Social determinants of health: Canadian perspectives*, edited by Dennis Raphael. Toronto, ON: Canadian Scholars’ Press.
- George, U., M. S. Thomson, F. Chaze, and S. Guruge. 2015. Immigrant mental health, a public health issue: Looking back and moving forward.. *International Journal of Environmental Research and Public Health* 12(10): 13624–13648.
- Guruge, S., and H. Butt. 2015. A scoping review of mental health issues and concerns among immigrant and refugee youth in Canada: Looking back, moving forward. *Canadian Journal of Public Health* 106(2): e72–e78.
- Hackworth, J., and A. Moriah. 2006. Neoliberalism, contingency and urban policy: The case of social housing in Ontario. *International Journal of Urban Regional Research* 30(3): 510–527.
- Harvey, D.. 2006. *Spaces of global capitalism*. New York, NY: Verso.
- Hertel, S., R. Keil, and M. Collens. 2016. *Next stop equity: Routes to fairer transit access in the Greater Toronto and Hamilton Area*. Toronto, ON: The City Institute at York University.
- Horgan, M.. 2020. Housing stigmatization: A general theory. *Social Inclusion* 8(1): 8–19.
- Hou, F., and L. S. Bourne. 2006. The migration–immigration link in Canada’s gateway cities: A comparative study of Toronto, Montreal, and Vancouver. *Environment and Planning A* 38(8): 1505–1525.
- Hulchanski, J. D. 2003. What factors shape Canadian housing policy? The intergovernmental role in Canada’s housing system. In *2004 Municipal-federal-provincial relations in Canada*, ed. R. Young and C. Leuprecht. Kingston, ON: Queens University Press, 221–250.
- . 2010. *The three cities within Toronto*. Toronto, ON: Cities Centre.
- James, C. E., and T. Turner. 2017. *Towards race equity in education: The schooling of Black students in the Greater Toronto Area*. Toronto, ON: York University.
- Jingco, K. 2017. *New funding to support career development for Black youth in Ontario*. <https://canadianimmigrant.ca/settlement/school/new-funding-to-support-career-development-for-black-youth-in-ontario>.
- Joy, M., and R. K. Vogel. 2015. Toronto’s governance crisis: A global city under pressure. *Cities* 49: 35–52.
- Keil, R. 2017. Toronto Alles Uber: Being rogressive in the age of progressive conservative urbanism. *Alternate Routes: A Journal of Critical Social Research* 28.
- Kipfer, S., and J. Petrunia. 2009. “Recolonization” and public housing: A Toronto case study. *Studies in Political Economy* 83(1): 111–139.
- LCHC. 2020. *About us*. LAMP Community Health Centre. <https://lampchc.org/about-us/>.
- . 2021a. *Advocacy*. <https://lampchc.org/about-us/advocacy/>.

- . 2021b. Youth Programs. <https://lampchc.org/programs-services/community-health-programs/youth-programs/>.
- Leask, J., P. Hawe, and S. Chapman. 2001. Focus group composition: A comparison between natural and constructed groups. *Australian and New Zealand Journal of Public Health* 25(2): 152–154.
- Levine-Rasky, C. 2016. *Whiteness fractured*. New York, NY: Routledge.
- Madanipour, A., G. Cars, and J. Allen. 1998. *Social exclusion in European cities*. London, UK: Jessica Kingsley.
- McLaughlin, A. 2019. Ottawa's \$1.3B investment is 'critically urgent' to fix Toronto's affordable housing, TCH head says. *CBC*. <https://www.cbc.ca/news/canada/toronto/ottawa-s-1-3b-investment-is-critically-urgent-to-fix-to-ronto-s-affordable-housing-tch-head-says-1.5088626>.
- Meng, Y., S. Giwa, and U. Anucha. 2015. Is there racial discrimination in police stop-and-searches of Black youth? A Toronto case study. *Canadian Journal of Family Youth/Le Journal Canadien de Famille et de la Jeunesse* 7(1): 115–148.
- MOHLTC. 2019. *Community health centres*. <https://www.health.gov.on.ca/en/common/system/services/chc/>.
- Omi, M., and H. Winant. 2014. *Racial formation in the United States*. New York, NY: Routledge.
- Ontario. 2019. Affordability of postsecondary education in Ontario. <https://news.ontario.ca/maesd/en/2019/01/affordability-of-postsecondary-education-in-ontario.html>.
- Paradies, Y. 2006. A systematic review of empirical research on self-reported racism and health. *International Journal of Epidemiology* 35(4): 888–901.
- Pascoe, E. A., and L. Smart Richman. 2009. Perceived discrimination and health: A meta-analytic review. *Psychological Bulletin* 135(4): 531.
- People for Education. 2013. *The trouble with course choices in Ontario high schools*. Toronto, ON: People for Education.
- . 2018. *The new basics for public education*. Toronto, ON: People for Education.
- Percy-Smith, J. 2000. Introduction: The contours of social exclusion. In *Policy responses to social exclusion: Toward inclusion*, ed. J. Percy-Smith. Buckingham UK: Open University Press.
- Pinson, G., and C. Journal. 2016. *The neoliberal city—theory, evidence, debates*. Toronto, ON: Taylor & Francis.
- Premji, S., and Y. Shakya. 2017. Pathways between under/unemployment and health among racialized immigrant women in Toronto. *Ethnicity & Health* 22(1): 17–35.
- Raphael, D., R. Renwick, I. Brown, S. Phillips, H. Sehdev, and B. Steinmetz. 2001. Community quality of life in low income urban neighbourhoods: Findings from two contrasting communities in Toronto, Canada. *Journal of the Community Development Society* 32(2): 310–333.
- Raphael, D., R. Renwick, I. Brown, B. Steinmetz, H. Sehdev, and S. Phillips. 2001. Making the links between community structure and individual well-being. Community quality of life in Riverdale, Toronto, Canada. *Health and Place* 7(3): 17–34.
- Samara, T. R. 2010. Order and security in the city: Producing race and policing neoliberal spaces in South Africa. *Ethnic and Racial Studies* 33(4): 637–655.
- Schrecker, T., and C. Bamba. 2015. *How politics makes us sick: Neoliberal epidemics*. Houndsmill, Basingstoke, UK: Palgrave Macmillan.
- Teixeira, C. 2008. Barriers and outcomes in the housing searches of new immigrants and refugees: A case study of “Black” Africans in Toronto's rental market. *Journal of Housing and the Built Environment* 23(4): 253–276.
- Thomson, M. S., F. Chaze, U. George, and S. Guruge. 2015. Improving immigrant populations' access to mental health services in Canada: A review of barriers and recommendations. *Journal of Immigrant and Minority Health* 17(6): 1895–1905.
- Toronto Community Housing Corporation. 2021. *Regent Park*. <https://www.torontohousing.ca/regentpark>.
- Toronto District School Board. 2019. \$3.5 Billion & Growing: TDSB Releases Current Repair Backlog.
- Viswanathan, L. 2010. Contesting racialization in a neoliberal city: Cross-cultural collective formation as a strategy among alternative social planning organizations in Toronto. *GeoJournal* 75(3): 261–272.
- Wesley, J. J. 2006. The collective centre: Social democracy and Red Tory Politics in Manitoba. Annual Meeting of the Canadian Political Science Association, York University, Toronto.
- White, P. 1998. Ideologies, social exclusion and spatial segregation in Paris. In *Urban degregation and the welfare state: Inequality and exclusion in Western cities*, ed. S. Mursterd and W. Ostendorf. London UK: Routledge, 148–167.
- Williams, D., and R. Williams-Morris. 2000. Racism and mental health: The African American experience. *Ethnicity & Health* 5(3–4): 243–268.

Wood, E. M. 1990. The uses and abuses of 'civil society'. *Socialist Register* 26: 60-84.

Zaami, M. 2015. 'I fit the description': Experiences of social and spatial exclusion among Ghanaian immigrant youth in the Jane and Finch neighbourhood of Toronto. *Journal of Canadian Ethnic Studies* 47(3): 69-89.