

REFUGEE SETTLEMENT SERVICES IN WINNIPEG:

Approaches, Programs and Organizations

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This paper was presented at the Canadian Association for Forced Migration Studies (CARFMS) conference at the University of Winnipeg , Winnipeg, May 11-14, 2016, 2016

<http://carfms.org/carfms-2016-conference/>

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ABSTRACT

This research argues that Winnipeg's settlement organizations require an evaluation of settlement methodologies and focus, and that re-examination of these settlement organizations could be beneficial to many refugees, particularly men whose needs are often given less attention. A critical literature review on acculturation orientation precipitated a change in the approach/method as it redirects the focus of the research from partnerships approach issues to gendered immigration. It also provided an excellent analysis of the challenges faced by refugees, and the challenges settlement organizations face in addressing these needs. In other words, why their attempt to provide 'holistic' service through partnership fails to include or cover all issues and all Refugee Community Organizations (RCOs).

KEYWORDS: Refugee, partnership, settlement service, holism, refugee community organizations

INTRODUCTION

There is paucity and dearth of research on effectiveness of settlement service organizations (SPOs) in Winnipeg, except for a few examining status of immigration and partnerships in Winnipeg with focus on settlement and integration issues¹ and on creation and importance of Refugee Community Organizations known as RCOs². In this study, RCOs refer to ethno-cultural, faith-based and other community organizations that support refugees. Related to the settlement services, this study is a step forward to examine their effectiveness in supporting newly arrived refugees in Winnipeg in order to understand how settlement services create difficulties of services experienced by refugees who are resettled in Winnipeg³. The reasons for this study are twofold: first, settlement service providers in Winnipeg could benefit from research that examines effectiveness of their settlement programs. Second, as the government of Canada plans to resettle twenty-five thousand Syrian refugees over the coming months⁴, improvement to its settlement services policy would be of vital importance because tailored refugee services would help the needs of the refugees in Manitoba and Canada.

Canada provides service supports for newcomers and there are substantiated arguments about the adequacy of these services in meeting refugees' settlement needs (housing, language, and crisis and trauma counseling)⁵. The provision of the settlement needs is operationalized through application of policy and programming approaches pertaining to refugees. With respect to the settlement policy, an income support for refugees remains a debatable aspect of the settlement services, particularly for refugee claimants who do not have income at all⁶. In 1996,

the Province of Manitoba took control of settlement services from the federal government, and focused its settlement policy mainly to attract and retain immigrants. The devolved responsibility resulted into a strong coordination of the settlement services in the province that benefited newcomers. Changes to the policy in 2012 by the Conservative Government reversed the benefits (strong newcomers' coordination and partnership mechanisms).

In Winnipeg, settlement programs take two approaches (holistic and partnership co-ordination). There is a tendency for these approaches to cover the different refugee typologies (GAR, PSR & claimants) and needs in one agency as well as co-ordinating with other agencies through holistic programming. In this context holism is defined as "...the systemic or scientific recombination of fragments in a new totality"⁷. There are challenges associated with this approach which is discussed later in this study. Equally, partnership receives the same treatment. Although many of the SPOs partner with each other, there is a lack of understanding for the crucial role a formal networking with ethno-cultural communities would bring to the table. Much of Federal Government funding is given to SPOs, despite the fact that RCOs are considered as best tools for refugee integration policy⁸. Consequently the CROs' ability to effectively integrate refugees in their communities is questionable. This situation is coupled with non-existence of programme planning, sharing of information and referrals between SPOs and RCOs. In cases where such programming exists, it takes place at a superficial level where communication ceases at community leadership level. As such institutional completeness for refugee settlement services is not realized⁹.

There is, moreover, a vociferous gender disparity in access to refugee settlement services specifically for refugee men. Although there is an assumption that all refugees do receive settlement supports, but refugee men are less supported. Tailored programs for them are rarely found and accessibility to them, when found, is based on locations.

This study addresses these exigent policy and programming issues experienced by refugees: *a)* an inadequacy of refugee service supports; *b)* a problematic holistic approach; *c)* a lack of effective partnership between SPOs and RCOs, and; *d)* the lack of refugee men gendered programming in Winnipeg. Taking all these points together, the study argues that the capacity of the local settlement service provisions in Winnipeg is inadequate in meeting the needs of refugees. The article is divided as follows: first, there is a review of literature on settlement services, including theoretical overview on participation and integration, settlement supports and

refugee typologies. Second, the study outlines a brief note on settlement support context in Manitoba. The settlement context is followed by a research methodology that takes into consideration a revision of settlement policy, an interview method and a personal observation. Finally, the study concludes with a discussion of research findings and conclusive remarks. Ultimately, the central objective of this research is to facilitate effective refugees' participation in settlement programs.

LITERATURE REVIEW AND THEORETICAL FRAMEWORK

REFUGEE TYPOLOGY

Under refugee categories, there are various types – Government Assisted Refugee (GAR), Privately Sponsored Refugee (PSR), and refugee claimants¹⁰. Refugees come to Winnipeg often not prepared for changes that they may face. Some of them have been in detention, tortured and been hiding from one place to another trying to protect themselves and their families. For those individuals, sometime the only source of survival for themselves and their families is to leave unexpectedly. Many leave behind some of their loved ones without having to say good bye to them. Some of the families get separated along the way and some have escaped and arrived in camps. Many arrive in Winnipeg not because they want to but because they must do it in order to survive and save themselves and their families.

The needs of refugees can be different in terms of meeting their emotional, psychological, spiritual, and cultural need. For GARs and PSRs, they often have familial links and at least sponsor's supports. However, a refugee claimant who comes from his country of origin, crosses a Manitoba border, arrives in Winnipeg and asks for asylum, their needs will be just slightly different from the GARs and PSRs. A refugee claimant has no entitlement whatsoever. They are not entitled to access health care, education and work visa until they get a permanent residency status and they might go through court process not knowing whether their refugee claim will be accepted or not. So they go to court back and forth and talk about their refugee experience, but there is no support out there to help them through the process. If their application is rejected, they are at risk of being re-traumatized because sometimes applications are not approved.

PARTICIPATION AND INTEGRATION

While articles reviewed in this study agree that settlement services have made many advances, it is crucial to realize that not all the advances are relevant to refugees. In most cases settlement services revolve around immigration integration and participation. However, the degree of refugees' integration and participation is difficult to measure because experiences and expectations of both refugees and host societies are diverse and difficult to attain¹¹. For this study, the concept of participation is defined as "the ability to participate fully in economic, social, and cultural activities, without having to relinquish one's own distinct ethno-cultural identity" including gender¹².

According to John Berry, complexities and consistencies in refugee lives is a best method for settlement services' programming because good settlement service keeps individual and groups feeling well and doing well in a new environment¹³. Any settlement service must objectively reduce refugees' negative consequences such as depression and incapacitating anxiety, among others¹⁴. To provide best settlement services, Berry outlines four methodological approaches to settlement: 1) pre-departure counseling, training and needs assessment, 2) application of a holistic approach at institutional level, 3) partnership with ethno-cultural communities, 4) and, multiculturalism as a national integration policy¹⁵.

Categorizing settlement approaches, cultural and structural dimensions, as a one way for settlement provision is a best framework for settlement of refugees¹⁶. In this framework there is more focus on ethnic collectiveness rather than structural integration. To operationalize the framework, settlement services should consider an intra and inter-group social and cultural integration processes first as a primary type of integration, than structural integration which is a participation in labor market and involvement in political activity as a secondary process. This approach gave a high priority to the cultural integration as a process of learning and it is a two way process.

This dimensional categorization of participation makes it easy to measure settlement. Conceptually, participation has four dimensions: labor market, social and relationship, cultural, and civil society/political. There are instances of variables that could be used as measurements for participation, such as education, housing, employment, socio-cultural integration with host, and the way a group is accepted or rejected by the mainstream society on an institutional level ensuring access for participation of refugees in society. In this sense participation is viewed as an

outcome of integration and defined as “a process of eliminating barriers to belonging, acceptance, and recognition for immigrant and refugees¹⁷.

The participation and integration of refugees has much to do with partnership with RCOs. Griffiths, Sigona and Roger indicate that “poor understanding of refugees’ needs is very common in settlement policies and that RCOs are better positioned to help their communities, particularly in the early phase of settlement...RCOs act to build up networks and provide a means of obtaining employment through the development of contacts”¹⁸. Further, RCOs could bridge services provided by the SPOs by creating partnership and coordination between them. This conceptualization of RCOs as settlement facilitators provides a unique way for refugees’ settlement in their communities through an establishment of informal networks.

Sidhu and Taylor assert that partnership is a vehicle for closing gaps that exist among settlement service stakeholders¹⁹. The idea of a bridging gap was first conceptualized by Robert Putman’s notion of social capital²⁰. Thus theorizing partnership in this way places onuses of settlement services on civil society instead of on state. This idea of partnership, therefore, reduces the role of state in settlement services and surprisingly it is a new theme in development thinking in which a state's expenditures are placed in check and ultimately reduced²¹. For this study, partnership is defined as a two-way process between SPOs and CROs. Thus, settlement service supports should be channeled through the two service providers.

Conclusively, the literature review sheds light on how the current settlement services practices can be improved or readjusted. As for refugees, the real question to be asked is how the refugee settlement services could maximize their services by examining and including refugee experiences, needs and RCOs in their policy and programs. Answering this question requires repositioning of concepts such as structural and cultural dimensions, holistic and partnership approaches. It also requires in-depth review of settlement funding strategies in which RCOs and refugee gendered programming received less attention. As a result of the literature review, this article approaches settlement services methodology differently.

WINNIPEG SETTLEMENT SERVICES CONTEXT

Manitoba government’s immigration settlement policy and services fluctuated according to immigration demand in Canada and this fluctuation precipitated a surge of settlement organizations, approaches and programs in Winnipeg²². In Manitoba, settlement services started with the inception of the province itself in the 1870s. A few years later, the Canadian

government established Citizen Councils to oversee settlement support to newcomers and also to ensure their integration into a Canadian society. Along the same line, a new Citizenship Council of Manitoba was established in Winnipeg to provide employment, housing, recreation and welfare needs to newcomers to the city. These targeted immigration approaches, programs and policy initiatives served European settlers and it also served as a population policy strategy²³.

By 1947, settlement services in Winnipeg were provided by a variety of organizations and agencies. Through the Citizen Councils, a first group of Winnipeg settlement agencies (International Center, Immigrant Center, and later the Manitoba Interfaith Immigration Council) were established. Ten years later, Winnipeg settlement services experienced an influx of people from different parts of the world. For instance, refugees from Asia and Latin America made their way to Canada and ended up in Winnipeg. With the increasing diversity of European settlers and non-European refugees, refugees' settlement services began to take a slightly different shape with noticeable increased focus on language, occupational training and support and housing.

With dawn of 2000s, Winnipeg has reached a peak on provision of best practices in settlement services and other players have joined the game (Jill 2015). Around 2008 and 2009 there was increased involvement of SPOs, CROs with limited involvement, provincial and municipal governments, and Winnipeg school Divisions, and neighbourhood programs 24. This array of settlement players began engaging in settlement programming utilizing holistic approaches and partnerships. The success of the best practices (holistic approaches and partnerships) has led to a diversification of settlement services and ensured inclusion of City of Winnipeg Local government in refugees' integration²⁴.

This best practice was made possible by a contentious funding policy²⁵. Over fourteen years (between 1999 and 2013), the federal government channelled funds to the province of Manitoba to provide settlement services to refugees, under the Canada Manitoba Immigration Agreement. However, as of April 2013, the federal government rescinded the agreement and resumed direct oversight of the administration of settlement and integration services in Manitoba. In summary, most of the agencies that provided refugees settlement services in Winnipeg were non-for-profit organizations and some were mainstream serving agencies. Settlement services for refugees in Winnipeg meandered from multicultural to intercultural approach with several players intensively engaged in the settlement processes.

RESEARCH METHODOLOGY

POLICY REVIEW

Research design for this study had two phases: An in-depth policy review and an interview. Preliminary online search on Manitoba Legislative and Manitoba Archives libraries resulted in a good number of articles, policies and reports on Immigration in Manitoba. When searching the University of Winnipeg databases using immigration policy as a keyword, 230 papers were found. Another search with settlement services in Manitoba as a keyword picked 23 articles. Most of the retrieved materials dealt with policy, funding arrangements, and settlement services for refugees. This has helped the study relate policy recommendations to the reality of specific research participants' experiences.

INTERVIEW METHOD

In phase two, the research interviewed five settlement services in Winnipeg using a survey questionnaire. The questionnaire focused on three areas of concerns: 1) past and current settlement services' policy and practice, 2) Service delivery as a result of settlement policy environment, 3) new policy recommendations. Among the agencies selected for the research are Manitoba Interfaith Immigration Council (Welcome Place)²⁶, Immigrant and Refugee Community Organization of Manitoba (IRCOM)²⁷, Entry Program²⁸, Manitoba Start²⁹, and Mount Carmel Clinic³⁰. These organizations were included because of their direct work with refugees. The interview lasted between 30-45 minutes where the researcher reviewed programs, workshops, events and activities, including feedback and other data pertaining to the research problem. In this phase, the participants were informed about the purpose of the research and were also asked to sign a consent form. All data from the interviews was tape recorded and transcribed into written documents. Utilizing themes and contents analysis, the transcribed data was analyzed based on research findings and the literature review.

OWN EXPERIENCE (OBSERVATION)

The research design also included the researcher's own observational experience as a GAR and currently working in the settlement sector, in one of the service agencies interviewed (IRCOM). Some sympathy towards refugee experience might surface. The researcher, however, is fully conscious of his double roles as a researcher and as a community worker and this realization minimizes biases that could be raised. The observation methodology has numerous

benefits for research including “firsthand experience of behaviours and events in their setting (or context) enables inductive enquiry rather than, reliance on prior conceptualizations”³¹.

SPOs IN WINNIPEG

In Winnipeg, there are about 61 non-governmental SPOs. These organizations work in eleven areas of service provisions (education, employment, general support service, health and wellness, housing, language service, mental health, recreation, seniors, women and family support, and youth support)³². Among these SPOs are Mount Carmel, Welcome Place, IRCOM, Manitoba START and Entry Program and they have been selected for this study.

Table 1: Winnipeg SPOs Refugees Settlement Practices (approaches and programs)

SPOs	Clients	Primary Integration	Secondary Integration	Holistic/ Partnership approach	Funding source
IRCOM Inc.	GAR, PSR, PNP, Claimant	Community connection - Befriending program (Family-to-Family)	Transitional housing (up to 3 years) Money management, Capacity building; Community development	Intensive With SPOs Less intensive With CROs	-IRCC -Diversified funding
Mount Carmel	GAR, PSR, PNP, Claimant, First Nation Peoples (Aboriginal)	Community Connection -Multicultural Awareness program	Healthcare Capacity Building, crisis counseling	Intensive With SPOs & CROs	-WRHA -United Ways -Other funders
Welcome Place	GAR, PSR, PNP, Claimant	Community connection -Community sponsorship	Initial Reception (Day 1-6 weeks)	Intensive With SPOs Less intensive With CROs	-IRCC - Diversified funding
Entry Program	GAR, PSR, PNP	-	Initial Orientation education and language training	Intensive With SPOs Less intensive With CROs	-IRCC - Diversified funding
Manitoba Start	GAR, PSR, PNP, Claimant	-	Initial Employment labour market integration	Intensive With SPOs Less intensive With CROs	-Province of Manitoba (75%) -IRCC

Mount Carmel clinic is a community health clinic and probably the first community clinic in Canada. It has been operating for almost 100 years. This clinic was set up specifically to

meet the need of the Jewish community who were persecuted all over the world and found Canada as home and Winnipeg as a place to settle. Currently Mount Carmel Clinic is meeting not just the needs of refugees, but also the needs of First Nations people, immigrants, including white Caucasians. In meeting its objectives, Mount Carmel Clinic works through collaborations with various ethno-cultural communities in Winnipeg through refugee community leaders who identify their communities' need. The identified needs are turned into teaching model or curriculum to be used by the community. For example, the Clinic hires community-based educators from the community, trains them, and supports them throughout the training and after it. The community-based educators then go out to their communities and start teaching in their first language what they have learned. So the Clinic is not just providing clinical support, but are also providing community development within the community itself to build capacity within those communities.

As core SPOs, The Welcome Place and IRCOM provide housing and accommodations. The Welcome Place provides initial settlement or temporary accommodation to GAR, initial orientations and referrals to a number of essential programs. Also, it provides interpretation, advocacy, supporting counselling and private sponsorship services which are basically supporting private sponsors. IRCOM provides a transitional housing for refugees, immigrants and Provincial Nominees. IRCOM helps newcomers settle in Winnipeg by providing a safe, affordable place for them. It runs an English language partners program and Family to Family program. These two programs connect IRCOM with Winnipeg community. For instance, IRCOM's Family-to-Family Program provides an opportunity for refugees' family to get involved in the Winnipeg community. Families who are well-established in Canadian culture are paired with families who are new to Canada for an opportunity to learn and grow together.

Manitoba START helps newcomers to Manitoba integrate into the labour market. Manitoba Start's objectives revolve around employment. It's main objective is to provide labour market integration and in this sense they are providing work entry support. In essence the Manitoba Start differs from SPOs because they are not supporting housing, language or counselling for refugees, but employment supports such as qualification recognition, work force entry, understanding how to enter a career, how to enter the work force in a job position that is related to newcomers' experience. 75% of Manitoba Start's funding primarily comes from the province of Manitoba and some portion from Manitoba Youth. This employment agency is

predominately serving Manitoba Provincial Nominees (MPNP) and fractions of refugees as well. The main objectives of the Manitoba Start situate it perfectly to serving Manitoba Provincial Nominee clients. Entry Program deals with settlement orientation and information, as well as language training. Despite the fact that Entry Program helps people with no literacy skills and special needs, they lack expertise in mental health as such they rely on partnership with other SPOs.

DISCUSSION AND ANALYSIS

SETTLEMENT SUPPORTS

In Canada, there are several settlement services programs that cater to newcomers such as Resettlement Assistance Program (RAP), an initial financial support to help GARs with start-up costs of living and temporary housing and documents processing³³; Immigrant Resettlement and Adaptation Program (ISAP), provides funds for settlement of newcomers in Canada; Language Instruction for Newcomers to Canada (LINC), provides a settlement support and platform for language acquisition to newcomers; Interim Federal health (IFH), a program that provides basic health coverage for refugees and a HOST Program that supports SPOs' initiatives to connect with RCOs³⁴. Among these programs, RAP is the only program specifically focused on government-assisted refugees (GAR). These settlement programs are designed to serve the interest of refugees through funding provided to SPOs"³⁵. Yu, Ouellet and Warmington reveal the insufficiency of the RAP to provide sufficient income for GAR particularly with regards to high housing rental cost³⁶. They also indicate that refugee claimants are not allowed to access LINC and the Interim Federal Health (IFH) does not cover mental and various types of counseling.

In 1996, the federal government handed over the control, planning and implementation of the settlement policy to the Province of Manitoba. The devolved responsibility created a strong coordination of settlement services in the province that benefited newcomers. Due to the new responsibility, the Province of Manitoba implemented a Manitoba Immigrant Integration Program (MIIP) to handle pre-arrival language assessment and services for newcomers³⁷. The MIIP was the Province's main approach through which the needs of immigrants were identified in a consultation with communities. All SPOs interviewed in the study indicated that the Province's control of the settlement service, which was managed by the Ministry of Immigration, labour and Multiculturalism, had effectively coordinated the settlement services. For example,

there was a smoothness of programs coordination, referrals, assessments, and individual settlement plan for refugees. Under the Province there was no need to fight for scarce resources or funding. Now every SPO is fighting for the same resources. Consequently, collaboration among SPOs is becoming a challenge. Conversely, the Province control over the settlement supports not only had a more strategic vision for its settlement sector, but also its proximity to refugees in the province made them aware of the refugees' settlement needs.

In 2012, however, the Conservative Government took over the control of settlement policy and reversed the strong coordination of settlement services in the Province. There is a consensus among the SPOs about the negative impacts of the devolution of an implementation of responsibilities because of resumption of control by the federal government. The refugees' settlement policy has undergone many changes from a macro management by the federal government to micro management by the Province of Manitoba then to the federal. In all these changes, the macro and micro responsibilities varied according to the levels of government involvements, the coordination ability and remoteness of the SPOs to the beneficiaries (refugees).

A HOLISTIC PROGRAMMING

SPOs which serve all typologies of refugees in Winnipeg emphasize their programming methodology on a holistic approach to settlement. They operationalized refugees' integration from a holistic lens. Mount Carmel Clinic, for instance, a primary health care facility has multiple services (dieticians, midwives, food clinic nurses and doctors, pharmacy, a laboratory, a dental department, and community services programs). This method is consistent with an integrated primary health care vision for refugees:

“The refugee health clinic delivers specialized primary care using providers who are aligned under one organization with common medical records, policies and procedures to guide professional practice. The model is dependent upon case workers accompanying clients to appointments, arranging language support and coordinating what is often a complex array of specialist and ancillary service appointments. This system navigator role for high needs or vulnerable populations is a concept which is increasingly evident in the healthcare sector particularly for vulnerable populations”³⁸.

The integrated refugee health care is based on a premise of existence of intense health needs for refugees, availability of local reception center and community providers as well as the existence of non-physician (therapies) specialist care deliverers.

Welcome Place and IRCOM's holistic approach are based on In-house and Out-house refugee holistic needs. The In-house needs refer to programs and needs that exist in a transitional housing for refugee where tenancy varies from a few weeks as for Welcome Place and maximum of three years for IRCOM, while an out-house needs are needs accessible beyond the transitional housing. Objectively, the SPOs are designed to supposedly meet refugees' needs in Winnipeg. Some of the SPOs engage in a holistic model even though they do not provide a temporary accommodation. For example, Entry Program and Manitoba START provide market integration and language supports services that meet the needs of refugees as well.

Though the SPOs holistic programming (housing, information, orientations and health and well-being) are differentiated in term of objectives, their programs' contents are the same. For Mount Carmel Clinic, Welcome Place and IRCOM provide support counselling and well-being services, community development and community connections. Depending on the agency's expertise, Welcome Place and IRCOM complement their programs by referring clients to Mount Carmel and other SPOs for mental health and well-being. On the same footing, contents for such services such as orientations, community awareness training, and community sponsorship program are duplicated. Eventually some refugees may continue to access services at Welcome place for sometimes while they physically transitioned out of welcome place to IRCOM.

As mentioned by the SPOs involved in the study, the Mount Carmel Clinic has a community-based educator training as one of its main objectives, the Welcome Place connects community organizations with sponsorship programs, and IRCOM helps refugees resettle by integrating them to resources in Winnipeg's communities. Most of the refugees accessing these differential programs and contents live in or around downtown Winnipeg where the SPOs are located. Consequently, there are recurrences of same services to the same refugees. As the refugees become dependent on one SPO, their private information deemed to be extremely inaccessible to others SPOs despite their consent to release information to other SPOs. For example when GARs move from initial reception housing (Welcome Place) to a transitional housing (IRCOM), they technically have two counsellors. This situation poses two problems: 1) there is a possibility of IRCOM fitting its needs of a holistic service delivery and Welcome Place imposing its out-housing services onto the GARs respectively. As well, the GAR may decide to accept or refrain from accessing services provided by the two SPOs. Inevitably, not only will the

problem create challenges where information sharing might become difficult, but it allows SPOs to compete for the same refugees.

The holistic way of programming is uncommon among the SPOs in Winnipeg and it is a vision of one-spot shop. Tension between what the SPOs wanted to accomplish and the contents of their programs may lead to provision of the same contents though different objectives. The conflict of objectives and contents may result in duplication and overlap of services, lack of sharing of sensitive information, and a competition for the same clients.

PARTNERSHIP WITH CROs

This study revealed several instances of formal partnership occurring among SPOs and to a limited extent between SPOs and RCOs. In some of the instances there are formal and informal partnership strategies. Mount Carmel, IRCOM and Welcome Place do formally partner with Bridge Care Clinic, a main refugee's clinic in Winnipeg, and other SPOs. They also partner informally with CROs (Iraqis, Congolese, and Serra Leones). The informal partnership is consistent with the cultural dimension, which is supposedly to be the primary focus of the settlement services.

To make the partnership possible, all the SPOs receive funding from the Immigration, Refugees and Citizenship Canada (IRCC) formerly known as Citizenship and Immigration Canada (CIC)³⁹, except the Manitoba START that is funded by the Province of Manitoba. In 2004, the IRCC channeled approximately \$134.8 million to SPOs in Canada to support newcomers to Canada. However, there was no mentioning of how much money was given to CROs, though, they were supposed to indirectly receive it through services provided by the SPOs. Despite the importance of CROs for refugees' settlement, the IRCC funding policy does not fund them. RCOs are the best inter-group organizations that belong to primary structure integration process⁴⁰. Based on this policy, including other reasons, the ability of the CROs to integrate refugees when they move to their new communities is diminished. Regardless of the funding policy, the SPOs have diversified their funding strategy to accommodate non-IRCC funded programs. For instance, they secured residual funds from the provincial government, the City of Winnipeg, United Way, Foundations, as well as from companies such as Rogers, MTS and others.

There is a tendency that partnership approach as applied by the SPOs might be ineffective

because the SPOs in Winnipeg would refrain from sharing refugees' information with other SPOs and CROs. This tendency creates a situation where every SPO would fight for same fund and clients. Moreover, it would also hinder effective programming with CROs. Notably, most of the funding arrangements are directed toward the mainstream SPOs serving different refugees typologies as well as immigrants. Most importantly, the SPOs have differential and conflicted objectives and contents that render the partnership undesirable and obsolete.

Most of the SPOs indicated a serious lack of engagement in informal networking with ethno-cultural communities, except a few programs such as family-to-family program, adult language partners program and community-based educators managed by IRCOM and Mount Carmel Clinic. The family-to-family program is a form of support system building program that connects refugees without adequate supports in matching method with volunteers for a certain period of time. This program has a crucial benefit for refugees by first allowing the host community accept refugees and second by facilitating integration of refugees in their new communities⁴¹. Most of these befriending programs connect refugees with general volunteers in Winnipeg instead of connecting them with their RCOs.

The RCOs are the primary vehicle for integration of new refugees. This study asserts that most of the refugees receive some settlement services to adjust to life in Winnipeg. However, the settlement supports are not only inadequate to serve the refugees, but they also fail to create partnership with RCOs. Understanding and familiarity with a joint programming with the RCOs is found to be less understood and implemented by SPOs in Winnipeg. Nevertheless, alliances and interconnectedness with these organizations are found to be practiced periodically by the SPOs.

GENDERED PROGRAMMING

With respect to gender programming, the SPOs reported that refugee women are accessing settlement service more than refugee men. Many of the SPOs are aware of the gender disparities among refugees in Winnipeg. One of SPOs' settlement workers mentioned that:

“In all of the SPOs there is a confirmation that more refugee women are accessing settlement services more than male because the men see themselves as the bread winners and protectors of their families...so reaching out is a sign of weakness”.

The inability of the refugee men to reach out creates a shift in gender roles among refugees because the women are reaching out while the men are not. Some SPOs report that IRCC

funding requirements does not allow SPOs to change programs to accommodate men's programming after funding bids have been approved. To improve programming, the SPOs opted to either diversify their fund strategy or report the men programs under broad categories such as family or workshops. This funding restriction undermines gender specifics in (male and female) programming. Against this background, IRCOM created a Refugee men program entitled "Men Barbeque Roundtable program (MBART). It is a program where men come together and discuss issues pertaining to them. Based on the funding agreement with IRCC, IRCOM is aware that IRCC does not fund its gendered programming. This restriction further exacerbates the gender access disparities because the MBART programming is now under-funded. There is a gender disparity in access to refugee settlement services specifically for refugee men. Although it is assumed all refugees receive settlement supports, refugee men are less supported. Tailored programs for them are rarely found.

Gender programming for men has not been heightened to the level of other programs provided by the SPOs in Winnipeg. A review of the SPOs programs indicated that gender balance in terms of male and female programming in settlement service is alarming because refugee women are accessing programs more than men. The reason for the inaccessibility lays on the lack of programming for men and to a lesser extent on available funding for refugee men's programs. To accommodate refugee men's programs, the SPOs diversified their funding strategy and the IRCOM refugees' men program is one of the valid examples of men programs in Winnipeg. With regard to funding, the macro oversight of the SPOs by the federal government has not contributed to the effectiveness of the service rather it worsened it. Thus, the SPOs are calling for the return of the Management of refugee settlement programs to the Province. There is also a sense of lack of readiness to handle trauma, counselling and case managements of high-need refugee cases because majority of SPOs lack trained staff in handling counselling and trauma.

CONCLUSION

This study concluded that the SPOs in Winnipeg do not do a good job of connecting with the community groups involved in settlement and integration of refugees. There was also lack of settlement services focused on refugee men. Moreover, the study totally agreed on and wondered why the government (and service providers too) see settlement as the sole purview of

the funded settlement sector, and largely ignore all the ongoing and core settlement work being done in community by community groups and organizations in particular ethno-cultural communities. The study found that there are insufficient supports for refugees. In situations where the supports were provided, they were incompatible with refugees needs. It is worth noting that although the Province of Manitoba effectively managed its SPOs during the devolution of responsibilities in 1996, this arrangement has not lasted longer because of the policy reversion in 2002. This situation was coupled with the implementation of problematic holistic approach by the SPOs where there were much duplication and overlapping of services. Moreover, although there are body of academic work done referring to the importance of CROs in settlement programs⁴², yet settlement services in Winnipeg employ partnership approach that ignores interaction with the CROs. Finally, refugee men programming in Winnipeg has not been seriously considered, though the men are found to not engage in settlement programs.

To remedy the remedies in settlement sector, refugees would greatly benefit from a creation of centralized centers or agencies where intake and services provide within the centers. Furthermore, the new model should consider inclusion of RCOs as serious partners in settlement sector particularly when comes to settlement funding. This new proposed vision should be a continuation of the settlement best practices that exist in Winnipeg. While the importance of connectedness between SPOs and CROs has been acknowledged, there is no way to ascertain the capacity of the RCOs to carry on the role of settlement provider organizations and contribute to the development of the settlement sector. Thus, more research needs to be conducted on how Refugee Community Organizations could play a bigger role and whether more explanations and methodology are needed.

ACKNOWLEDGEMENT

Thanks to my faculty supervisor Dr. Shauna Labman, Faculty of Law, The University of Manitoba for her continuous support, motivation, enthusiasm and immense knowledge that helped me successfully carried out this research. I am also grateful and indebted to Dr. Kirit Patel, Menno Simon College affiliated with the University of Winnipeg for excellent teaching and guidance on my Honour Thesis in International Development Studies. Further, my heartfelt gratitude goes to my academic and professional colleagues for peer reviewed the research manuscript.

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