

## **Another Live-in Caregiver Dying of Cancer**

As of this writing, another Filipina live-in caregiver is quietly suffering from advanced stage cancer and has been told that she has less than six months to live. She and her accompanying family members in the Live-in Caregiver Program (LCP) permanent resident application are likely to be declared medically inadmissible for potentially causing an excessive demand on Canadian health and social services. She is therefore seeking an exemption from this requirement on humanitarian and compassionate grounds.

This is happening only about half a year after the highly-publicized case of Juana Tejada who was similarly diagnosed with advanced stage cancer and who was initially refused permanent residence in Canada under the live-in caregiver class. She and her husband were later granted permanent resident status on humanitarian and compassionate grounds after extensive media coverage and public pressure.

How many more caregivers will have to suffer a similar fate? Do these caregivers have to beg the government for humanitarian and compassionate consideration every time one is found to have a serious illness after having completed two years of full time live-in caregiving work in Canadian households?

These heartbreaking stories only further prove that there is something terribly wrong with the LCP and its concomitant policies. First of all, it is totally unjust to require caregivers to undergo a second immigration medical examination after their LCP permanent resident applications have been approved in principle. When these caregivers came to Canada, they have already been required to pass an immigration medical examination before they can be granted a work permit to work under the LCP. They are then required to perform full time live-in caregiving work for at least two years within three years of arrival in Canada. Once they have done so and are eligible to apply for PR status for themselves and their families, they are once again required to undergo another immigration medical examination. This often creates problems as most of the medical issues which render them inadmissible for PR status often only arose in Canada. The frequency of illnesses found among caregivers at their immigration medical examination, such as various types of cancer, ulcers, anemia, etc., can only lead one to reasonably suspect that the long hours of work, uncertainty in their status, separation from family, and all the stress that go with these, greatly contribute to the deterioration of their health condition.

The requirement of a second immigration medical examination should therefore be eliminated. Or at the very least, live-in caregivers should be included in the categories which are exempt from being declared inadmissible if their health condition might reasonably be expected to cause excessive demand on health or

social services. At present, the categories which are exempt from the excessive demand requirement are spouses, common-law partners and children who are being sponsored by Canadians or permanent residents, those who are found to be refugees and protected persons. There is no reason why live-in caregivers cannot also be included in this list, especially considering the often tremendous hardship they have to go through just to satisfy the stringent LCP requirements in obtaining permanent resident status.

Another problematic health-related issue in these situations is the lack of public health coverage when the live-in caregivers have been approved in principle and are issued open work permits. Live-in caregivers are provided OHIP coverage while they are on employer-specific work permits (with positive LMOs issued by Service Canada). However, once they apply for permanent resident status and are issued open work permits, they become disqualified from OHIP coverage because their work permits are not employer-specific.

This is an erroneous interpretation of Regulation 552 of the Ontario Health Insurance Act which clearly indicates that LCP participants should be granted OHIP coverage, without distinguishing whether they are on LMO-based or open work permits. Unfortunately, bureaucrats have interpreted the law differently and have refused OHIP coverage to live-in caregivers on open work permits. This is simply wrong and must be immediately rectified, for the sake of the many caregivers who find their health condition to have deteriorated due to the highly undesirable working conditions perpetrated by the LCP.

I can go on listing the many problems arising from the LCP. But I will end here for now as the critical health concerns of dying individuals call for immediate action. It is about time that the Filipino community work together and unite in knocking on the government's doors to finally do something about this terribly unjust situation that is affecting many of our *kababayans*. Enough is enough.

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