



April 29th, 2026

Rt. Hon Mark Carney
Office of the Prime Minister
80 Wellington Street
Ottawa, ON K1A 0A2

Via Email: pm@pm.gc.ca

Dear Prime Minister Carney,

Re: Federal Decision to Introduce Co-payments under IFHP

Alongside the Canadian Refugee Health Network, the Shelter and Support Board Advocacy Coalition (SSBAC) is deeply concerned that the federal government's plan to introduce **co-payments** for medications and supplemental services under the **Interim Federal Health Program (IFHP)** will **increase health costs, harm newcomer health, and lengthen stays** in shelters and transitional homes, ultimately worsening the homelessness crisis.

The SSBAC is a coalition of Board Directors – community voices – from shelter agencies in Toronto, including Fred Victor, Dixon Hall, Fife House, Sojourn House, Eva's, YWCA Toronto, TNG and L'Agapanthe. The SSBAC is supported by its partners, the Toronto Shelter Network (TSN) and the Ontario Nonprofit Network (ONN).

The federal government is introducing unaffordable co-payments for essential health care, including medications, mental health counselling, physical therapy, and vision care. These cuts, to take effect **May 1, 2026**, will **immediately harm refugees**, who are already struggling to meet basic needs, like food and housing.

During the first year, refugees often have low income, and they don't typically have access to provincial drug plans or employment-based health insurance. Co-payments will create financial barriers to health access resulting in worsening of refugees' health. This will mean more individuals will end up unnecessarily in emergency departments and hospitals, contributing to escalating health care costs.

The services targeted for co-payments – mental health care, dental care, vision and hearing supports, mobility aids, medical supplies – are not optional for refugees' functioning, safety, or ability to work. Lack of access to these services and reduced ability to accumulate savings due co-payments will:



- Lengthen stays in shelters and transitional homes
- Delay integration
- Increase disability
- Reduce economic participation
- Increase public health risks (e.g., TB, HIV transmission)

Together with the Canadian Refugee Health Network, SSBAC requests that the federal government:

1. **Maintain full IFHP coverage** without co-payments.
2. **Accelerate refugee claim processing** to shorten IFHP enrollment.
3. **Invest in early primary and preventive care**
4. **Conduct thorough health and economic impact assessments** before implementing changes.

The SSBAC calls on the federal government to reverse its decision to introduce co-payments on May 1, 2026.

Yours truly,



Jawad A. Kassab, LLB, MBA, MDiv
Shelter and Support Board Advocacy Chair
kassabja@rogers.com (416) 606-2753

cc: Hon. Lena Diab, Minister of Immigration, Refugees and Citizenship
 Hon. Marjorie Michel, Minister of Health
 Tim Krupa, Director of Policy, Office of the Prime Minister
 Jonathan Alomoto, Director of Policy, Office of the Minister of Immigration, Refugees and Citizenship
 Sandenga Yeba, Director of Policy and Deputy Chief of Staff, Office of the Minister of Health
 Dr. Meb Rashid, Canadian Refugee Health Network



CENTRAL NEIGHBOURHOOD HOUSE
 NEIGHBOURHOOD LINK
 ST. STEPHEN'S COMMUNITY HOUSE



NATIONAL ADVOCACY
 COMMUNITY ACTION

