



Canadian Chinese Medical Society (CCMS Ontario)

Address:

Dr. Chi-Ming Chow
President, CCMS

Division of Cardiology
St. Michael's Hospital
Toronto, ON M5B 1W8

T (416) 864-5201
E cardio@mac.com

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Dr. Kevin Smith
President & CEO
University Health Network
200 Elizabeth Street
Toronto, ON M5G 2C4

Re: Urgent Concern Regarding the Closure of the Asian Initiative in Mental Health (AIM) and the Importance of Culturally Responsive Care

Dear Dr. Smith,

On behalf of the Chinese Canadian Medical Society (Ontario), I am writing to express our grave concern regarding the recent closure of the Asian Initiative in Mental Health (AIM) at UHN. The elimination of this longstanding and widely respected program represents not only the loss of a culturally responsive mental health service but also a significant step backward in advancing equity-informed care.

Our society was established in 1979 in direct response to the racially inflammatory and xenophobic portrayal of Chinese Canadians in CBC's W5 broadcast. That moment galvanized Chinese Canadian physicians to unite, challenge systemic discrimination, and advocate for fairness and integrity in Canadian healthcare. Since then, CCMS has remained steadfast in its mission to support Chinese Canadian healthcare professionals and to promote equity for all racialized and minority communities within the healthcare system.

We have long understood that culture is not peripheral to care—it is central to good medicine. This is especially true in mental health, where language, stigma, values, and communication styles profoundly shape diagnosis, treatment engagement, and recovery. In psychiatry, clinical presentations require nuanced assessments that integrate biological, psychological, social, and cultural dimensions. AIM was established over two decades ago to address these complexities and close persistent gaps in access and outcomes among Chinese Canadians—particularly in the Greater Toronto Area, where the Chinese

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community now exceeds 680,000 and constitutes the largest non-English-speaking minority population.

AIM was far more than a clinical program. It trained future leaders in cultural psychiatry, fostered trust with community partners, and led public education efforts during key public health crises, including SARS and COVID-19. It was widely recognized as an academic and service-based model of excellence—frequently featured at the Federation of Chinese American and Chinese Canadian Medical Societies (FCMS) Biennial Conference as a leading example of culturally competent care. AIM also contributed to advancing knowledge of culturally appropriate mental health care for Chinese and other ethnocultural communities, and its expertise has strengthened the capacity of physicians across North America to better serve Chinese and other ethnocultural populations both locally and globally.

To dismantle AIM without meaningful consultation with the Chinese community and the medical community is deeply concerning. It signals that culturally specific programs are dispensable—at a time when misinformation and backlash against diversity, equity, and inclusion (DEI) are on the rise. This troubling narrative mischaracterizes DEI as political rather than essential. It ignores compelling evidence: Chinese Canadians continue to experience lower mental health service utilization, higher levels of unmet need, and greater risk of coercive care, including involuntary admission. These inequities—further illuminated during the COVID-19 pandemic—directly contradict the persistent “model minority” myth that has long obscured systemic disparities.

As Canada’s largest academic health sciences centre, UHN is uniquely positioned to lead by example. The closure of AIM undermines UHN’s stated commitment to inclusive excellence and jeopardizes over two decades of progress in building culturally grounded, community-trusted care. We respectfully urge you to reconsider this decision and to initiate a meaningful dialogue about restoring and strengthening culturally responsive mental health services for Chinese and other underserved communities.

The Chinese Canadian Medical Society (Ontario) would welcome the opportunity to meet with you and your leadership team to explore how we can support a

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renewed, equity-focused vision for mental health care—one that honours AIM's legacy and reinforces UHN's leadership in this critically important domain.

Yours sincerely,



Chi-Ming Chow, M.D. MSc FRCPC FCCS FASE DBIM CPC(HC)
President
Chinese Canadian Medical Society (Ontario)
www.ccmsontario.com
Professor in Medicine, University of Toronto
Director, Echocardiography Lab
Staff Cardiologist, St. Michael's Hospital