

# Untold Stories of Racialized Immigrants with Disabilities during COVID-19 in the Greater Toronto and Hamilton Area – Inequities and Change

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# Study Overview

- **Objectives**

- To understand the complexities and barriers racialized disabled immigrant experience accessing or attempting to access rehab/health/social services
- To document their recommendations on how to decrease inequities to these services during COVID-10 and beyond

- **Theoretical Frameworks**

- Critical Disability Studies and Critical Race Theory
- Both use counter narratives to challenge racist and ableist ideologies (Claire, 2017; Dossa, 2009; Erevelles, 2011; El-Lahid, 2011, 2020; Niles 2018, 2021)

- **Methodology**

- Narrative Inquiry using Story-Telling (Dossa, 2009; Niles, 2021; Riessman, 2008)
- Data collected through demographic questionnaire and semi-structured interviews

# Participant Characteristics

**TABLE** participant demographic variables ( $n = 10$ ).

<b>Participant Characteristics</b>	<b>Total Patient Sample</b>
<b>Demographics</b>	
Median age, years (range)	30 (20, 42)
<b>Gender Identity</b>	
Female	6
Male	4
<b>Racial Identity</b>	
Black	8
Middle Eastern	2



# Participant Characteristics

## Migration

### Birth Country

Afghanistan	1
Germany	1
Iran	1
Nigeria	1
South Africa	4
St. Lucia	1
U.K.	1

### Migration Country

Afghanistan	1
France	1
Germany	1
Iran	1
Nigeria	1
South Africa	3
St. Lucia	1
U.K.	1

### Years lived in Canada

Less than 4 years	3
Between 4- less than 7 years	2
Between 7- less than 10 years	5

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Data are presented as *n*, unless otherwise stated.

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# Emerging Narratives

- **Systems of oppression** shape access to and participation in health, rehab, and social services.
  - Some factors exacerbated by COVID (e.g. increased feelings of isolation/being "othered")
- **Participants access services only in a moment of crisis.**
  - Many are surviving but not thriving with the level of care received outside of crisis, and have difficulty accessing talk therapy
- **Protective factors facilitate access to services.**
  - Participants who are fluent in English or have financial resources tend to not experience the same barriers to accessing care.

# Regina is a 20-Year-old Racialized Disabled Immigrant Woman Living in the Greater Toronto and Hamilton Area

- Soon after the start of the COVID-19 pandemic, Regina migrated alone from Nigeria to Hamilton, Ontario to pursue post-secondary education. She has mental health disability which began in early childhood but had not accessed formal supports for it in Nigeria.
- Regina experienced a mental health crisis upon arriving to Canada and was admitted to a local hospital. With limited social supports in Hamilton, Regina had to learn how to navigate a complex and unfamiliar health system alone.
- A few days after being discharged, Regina fell ill with COVID-19 symptoms. She experienced significant difficulty accessing diagnosis and treatment. She was dismissed by a healthcare provider who told her she was experiencing challenges in adjusting to her new life in Canada.

# Regina's Story

I remember going to her office... I was just telling her when I woke up this morning, I felt really weird. I'm telling you... I literally was getting COVID right in front of this lady and then to her perspective, it was just like, " Oh, well, you just moved to Canada and you're Black and that's what's happening. **You're just adjusting to like the weather.**"

I'm telling you my signs of COVID literally exposed themselves right in front of a [expletive] medical doctor and she didn't do anything about it.

And I'm telling you this doctor was just [expletive] **so blind to it, even when I was trying to tell her**, I feel like this, I feel like that and she was like, " Don't worry, it's just you **transitioning,**" and I'm like, girl I've been here a month and a half.

# Tammy is a 36-year-old Racialized Disabled Immigrant Woman Living in the Greater Toronto Area

- Tammy migrated alone to Toronto from South Africa a few years before COVID-19 started to pursue post-secondary education.
- Tammy has a physical disability caused by an accident experienced as a child in South Africa.
- Soon after she arrived to Canada her disability worsened significantly. Prior to the start of the COVID-19 pandemic, she was admitted to the hospital for a major surgery. At the hospital, she experienced several racial microaggressions that affected her ability to trust the Canadian healthcare system.



# Tammy's Story

When I first found out that I had to amputate my leg... the doctor was like, "**Who did this work? Who treated your leg? This is bullshit.**" and all that, you know. And I...stated that I'm new to Canada and this was back home. The **atmosphere changed**. And from that day, whenever they spoke about [my disability]... they kind of like talked like **all Black people** didn't know what they were doing or something.

... I think the idea that they knew that I was **new to Canada**, it just gave them... the **superiority** to, you know, want to... talk to me like an **inferior person** or like I wouldn't understand certain things.

I knew when they had to like start explaining words that like maybe back home we didn't learn it or something. And I'm like, oh my God, **English is my primary language**. Even at home, you didn't have to do that. You know, and all that. Just like **segregation** with certain things didn't make me feel so **comfortable**.

# Future Directions for Equitable Care

- Need for **implicit bias training** and **improved education on systems of oppression and equitable care** for settlement, migration, rehabilitation and other health service providers
- Providers must understand the **impact of COVID-19** on the barriers and facilitators that racialized disabled immigrants experience when accessing or attempting to access services
- Implement transformative interconnected services and programs that can better respond to the needs of clients who experience a confluence of barriers due to interlocking systems of oppression

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