Black Peoples' Health in Canada

Presented at the Victoria Forum

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Land Acknowledgement

 We acknowledge and respect the Ləkwəŋən (Songhees and Esquimalt) Peoples on whose territory the university stands, and the Ləkwəŋən and WSÁNEĆ Peoples whose historical relationships with the land continue to this day.





African and Black Ancestral Acknowledgement

- I would like to also acknowledge my ancestry, a deep and profoundly relevant history of African people across the diaspora. We have a history, lineage, and inheritance that predates this country, chattel slavery, and colonialism that begins with Africa. It is an ancestry that recognizes the struggle and survival while honoring our narrative and self-determination.
- People of African Descent continue to contribute to ensure a vibrant life in Canada despite our history of colonization, slavery, segregation, environmental discrimination and deskilling.
- Today, I stand valued, grateful and proud to be an African





Black People in Canada: Demographic

- Canada's Black population reached 1.5 million in 2021, comprising 4.3% of the total population and 16.1% of the racialized population.
- The Black population in Canada identifies with over 300 ethnic or cultural origins, showcasing its diversity.
- Cappuccino effect: Black people are under-represented in the upper tiers of the workforce





Black People Experience Poor Health Outcomes

- COVID 19
- HIV/AIDS
- Perinatal outcomes
- Mental health
- Breast cancer
- Prostate cancer
- Diabetes
- Fibroid

- Sickle cell disease
- Cardiovascular disease
- Stomach cancer
- Cortus uteri cancer
- Lymphoma
- Multiple myeloma
- Endocrine disorder

- Justice system
- Child welfare



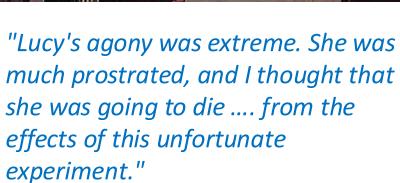
Canada's History of Anti-Black Racism

- Slavery
- Racism in all sectors
 - Environment
 - Immigration policy
 - Health education programs
- Unethical research



"the Negro race...is deemed unsuitable to the climate and requirements of Canada."







Trust

- Trust
 - Black peoples trust in government and institutions
 - Government, institutions and non-Black peoples trust in Black people
- Rooted in contemporary and historical experience of racism
- Shapes
 - access and use of health services
 - sources of information --- religious leaders
 - willingness to engage in any activity, including research
- Trust reproduces and intersect with other inequities
- Contributes to health and socio-economic inequities

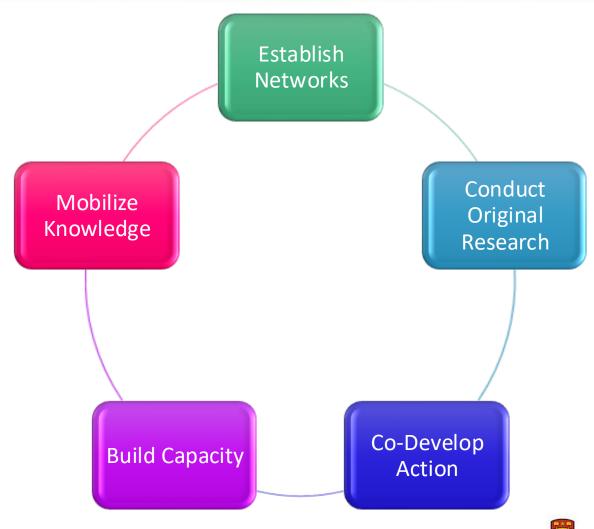




Black and Racial Equity Research Program: Research Evidence

 Canadians faces racialized health inequalities, which have a negative impact on the health.

 Racism plays a significant role in contributing to poor health outcomes, leading to a decrease in overall population health.





Research with Communities

• Don't just jump in, you know, like the **fly-by-night scholars**. Do you have a relationship with them? Because that will also affect the quality of your data. Our people are suspicious of the mainstream, and rightly so. You're dealing with people who her suspicions. You need to gain their trust and you don't gain it in one week. [P001]

 A lot of the participants including – and also organizations within our communities complain that a lot of researchers are fly-by-night.
 Before they come to us they have already designed their research project. [P001]



Distrust

- So, there is a lot of broken trust between the ACB [African Caribbean Black | communities and the mainstream medical health care because of the medical history between the ACB communities and the system, the health system We could talk about the Tuskegee experiments And similarly, to look at other Black experiences in the health care that we see. (P001, female, 36 yr)
- I know it sounds really hard and it sounds bizarre, but at the core of it I think is anti-Black racism. I think when you are a population that's the most hated population, when you're a population that faces the most disenfranchisement, when you're a population that has, next to the Indigenous, the highest number of people in child — in the number of Black kids in child welfare, when you have the highest number of Black men incarcerated, I think it's all that. So Black people just don't trust. (P019, female, 44-54 yr [participant provided an age range])



What contributes to COVID-19 online disinformation among Black Canadians: a qualitative study

Janet Kemei PhD, Dominic A. Alaazi PhD, Adedoyin Olanlesi-Aliu PhD, Modupe Tunde-Byass MD, Ato Sekvi-Otu MD, Habiba Mohamud PhD, Bukola Salami PhD

Background: Black Canadians are disproportionately affected by the COVID-19 pandemic, and the literature suggests that online disinformation and misinformation contribute to higher rates of SARS-CoV-2 infection and vaccine hesitancy in Black communities i Canada. Through stakeholder interviews, we sought to describe the nature of COVID-19 online disinformation among Black Canada. ians and identify the factors contributing to this phenomenon.

stakeholders with insights into the nature and impact of COVID-19 online disinformation and misinformation in Black communitie We analyzed data using content analysis, drawing on analytical resources from intersectionality theory.

Results: The stakeholders (n = 30, 20 purposively sampled and 10 recruited by way of snowball sampling) reported sharing of COVID-19 online disinformation and misinformation in Black Canadian communities, involving social media interaction among family friends and community members and information shared by prominent Black figures on social media platforms such as WhatsApp and Facebook. Our data analysis shows that poor communication, cultural and religious factors, distrust of health care systems and distrust of governments contributed to COVID-19 disinformation and misinformation in Black communities.

Interpretation: Our findings suggest racism and underlying systemic discrimination against Black Canadians immensely cata the spread of disinformation and misinformation in Black communities across Canada, which exacerbated the health inequities Black people experienced. As such, using collaborative interventions to understand challenges within the community to relay information

Toronto showed Black people accounted for 24% of positive cases despite constituting only 9.3% of the city's total population.2 Black people and other racialized communities n Canada are also more likely to be admitted to hospital with COVID-19 than White and East Asian people.3 Further, evidence shows a universal vaccine hesitancy across countries and subgroups.4 Disinformation and misinformation about COVID-19 contributes to health disparities by posing a threat to the acceptance of the SARS-CoV-2 vaccine among Black Canadians.5-10

lack Canadians are disproportionately affected by the COVID-19 pandemic. For example, as of Sep-vulnerabilities, which increase the burden of COVID-19 more vulnerabilities, which increase the burden of COVID-19 mortember 2020, data tracking of COVID-19 cases in bidity and death to this population, 12,11 thus increasing vaccine skepticism and hesitancy. On completing a scoping review of online disinformation among Black people, 14 we wanted to deepen our knowledge and situate the findings from our scoping review within the Canadian context. Despite the negative health behaviours promoted by disinformation, there is a pau city of qualitative studies examining online COVID-19 disinformation in Black communities in Canada. We aimed to describe the nature of online COVID-19 disinformation and misinformation among Black Canadians and identify the factors contributing to this phenomenon

COVID 19 at Intersection of Racism

 "And also, like, during the pandemic there was the whole the Black Lives movement, the protests and everything. And that was a very big moment as well. I know those protests that, like, were held here as well in Edmonton and I know a lot of people were just fed up. I think the pandemic just accelerated all those emotions as well because it's like, how many things are we going to deal with? Like, at least with the pandemic it's – a lot of it is beyond our control and it's physical and it's to do with our health. But with, you know, with racism and with all the issues that with police brutality and black people are facing, that's obviously social and it's due to other humans" (Female, 19, born in United Kingdom)

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Abstract

Background: The intersection of the COVID-19 pandemic with systemic anti-Black racism in the form of police violence and the subsequent Black Lives Matter movement has created an especially critical juncture to examine the mental health of Black youth.

Purpose: The purpose of this study was to understand the intersecting impacts of anti-Black racism and the COVID-19 pandemic on the mental health of Black youth.

Methods: A youth-engaged research approach and intersectionality framework were utilized. Semi-structured interviews with Black youth across Canada (ages 16 to 30, n = 48) were conducted online via Zoom and analyzed using thematic analysis. Fourteen Black youth were hired to form a Black youth advisory committee, who guided the research process.

Results: The "dual pandemics" of the COVID-19 pandemic alongside highly publicized incidents of racism and the subsequent Black Lives Matter movement negatively impacted participants' mental health. Four main themes emerged: (1) ongoing exposure to acts of anti-Black racism (2) compounding effect of racism on mental health; (3) high stress levels and fear; and (4) anger and emotional fatigue from lack of shared, long-term solutions.

Conclusion: The simultaneous occurrence of the COVID-19 pandemic and instances of systemic anti-Black racism in the form of police violence presented "dual pandemics" for the Black community, profoundly impacting the mental health of Black youth and adding urgency and impetus to its prioritization. Results of this study indicate that it is critical to explore each event individually as well as the combined impact on the mental health of Black youth, particularly from a racial perspective.

Keywords

Mental health, black youth, intersectionality, COVID-19, anti-Black racism, police brutality



Racism and Health

- Mistrust of Black People in Canada Contributes to Poor Mental Health: "In my community it's very easy, because obviously the community understands the struggles that are out there. Outside my community there is, and I think I've subconsciously learned to do this... Just kind of put... start out with the notion that I'm not going to rob you [Laughs], right? Especially when I interact with white people, just kind of the first thing that I have to attack is the preconceived notion that I am black, I'm a thug, or whatever"
- Anti-Black Racism Contributes to Poor Mental Health: "I grew up with so much internalized anti-Blackness. God, I hated myself. I wanted to be white so bad. I wanted to have straight hair. I wanted to have lighter skin. You know, I wanted smaller lips. There was one time a girl told me... I was sleeping over at her house, and she was looking at me. I was like, "What?" And she's like, "You have N lips." Participant 9

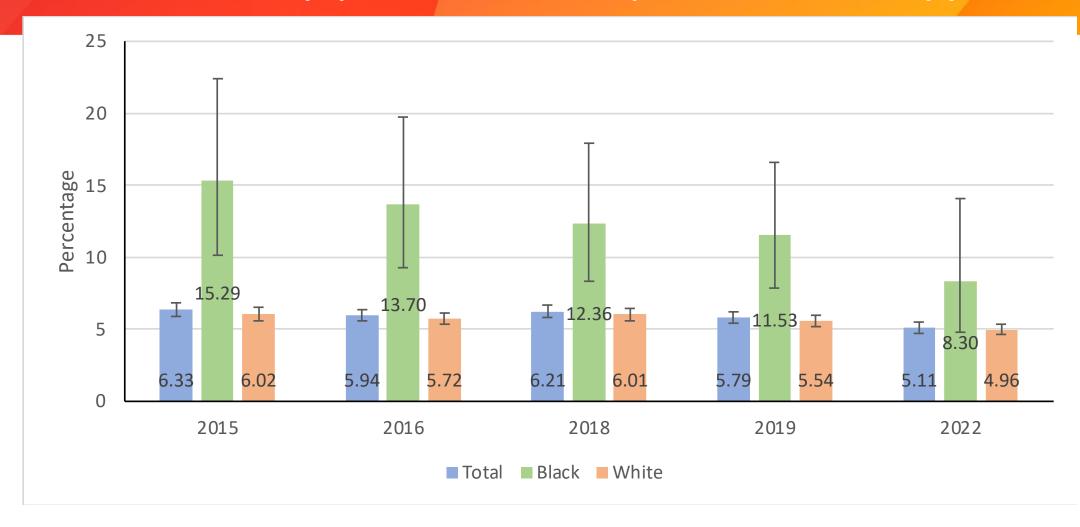


Access to Mental Healthcare

So I looked into like Blue Cross private coverage. You pay for – you – like the minimum that I would pay, it's like \$1500, \$2000 a year, and they only give me – they only cover \$500 dollars for psychology. That's not enough. And not only that they only cover \$500; they say, "We only pay \$30 per each session." So out of \$200, I've got to pay \$230 dollars – sorry, \$130 dollars. I still can't afford it. (Participant 049, Mom)



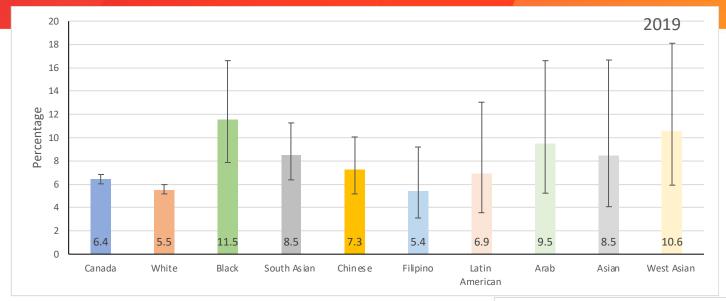
Annual prevalence of cost-related non-adherence to prescriptions in the adult Black and White population from the ten provinces of Canada by year*

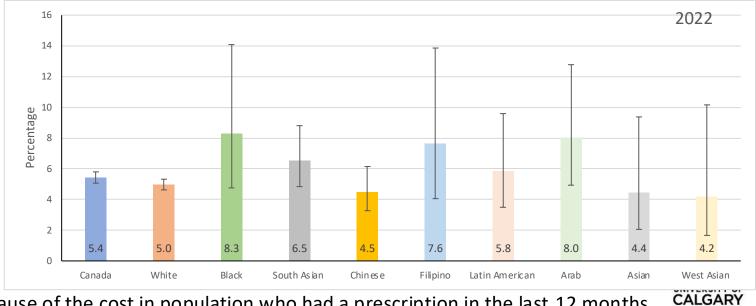


Cultural background: aPR: 1.39 (95%CI: 1.14 - 1.71, p=0.001).

Adjusted prevalence ratio (aPR): Adjusted by 23 variables, including prescription insurance, age, gender, education, income, among other *Did not fill or skipped prescription medication because of the cost in population who had a prescription in the last 12 months. CCHS. UNIVERSITY OF CALGARY Average pop:16,544,715.

Annual prevalence of cost-related non-adherence to prescriptions in adult from the ten provinces of Canada by cultural background



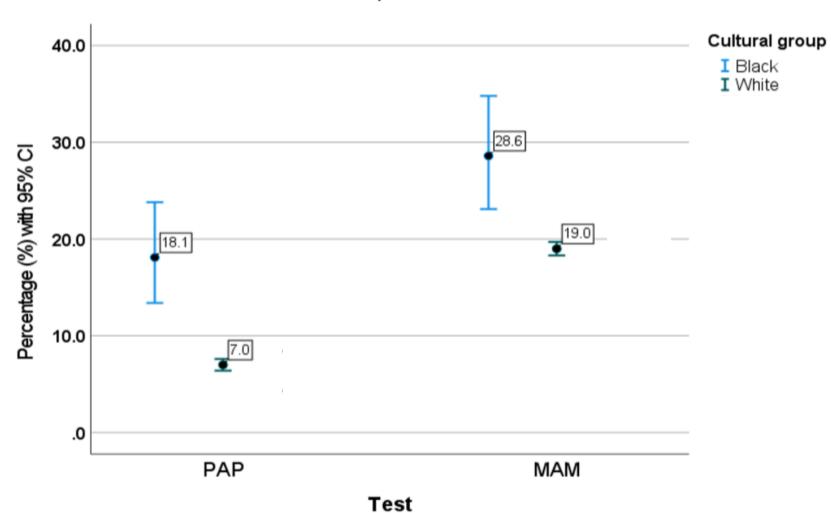


^{*}Did not fill or skipped prescription medication because of the cost in population who had a prescription in the last 12 months. Average pop:19,962,138

Figure 5. Percentage of women who did NOT have:

- (1) Pap Smear Test (PAP) lifetime (women 21 to 70 years old), or;
 - (2) Mammography (MAM) (women 40 to 74 years old).

Canadian Community Health Survey.
Women 18 years old and above. 2015 to 2019.





Access to Healthcare for Black Women

- ...the doctors I had experience with were White, which is fine, but I think in addition to that, they
 also weren't very culturally aware or like considerate of like different lifestyles or things like that,
 so I was just really hesitant to approach them. (EDM27)
- We are poorly represented when it comes to the medical field. We don't have many Black doctors....Well, I guess there is that kind of feeling, like you are out of place, and probably many people would feel the same, talking to somebody totally blinded to your cultural background and some of the issues that they may be dealing with health-wise, so. (CALO2)
- ...sometimes it's nice to have like a Black nurse, you know, or a Black doctor talk to you. That
 might make you feel a little bit more comfortable. But that that's not the case, and it's still kind
 of [Laughs] it's very rare. So I feel like even that is like a challenge, because at least there's that
 rapport. (EDM07)



Consequences of Lack of Trust

- P: ...She had a mental problem. Yeah, she ended up in Royal Alex Hospital....
- I: How is the kid now?
- P: The girl now is she took her to Somalia.
- I: Oh. Why did she take her to Somalia?
- P: She said she doesn't like the, you know, the medication ...
- I: ... So the person that took the child back to Somalia, what treatment is the child getting in Somalia now?
- P: Somalia, she said she's getting a lot of Koran.
- I: Koran?
- P: Yes. And she has a lot of relative. She is she's not actually, she is feeling okay, she said. Like she's not 100 percent, but she's not somebody who's going to cause a problem.... It's very difficult.





Positive Cultural Identity

Program

This innovative, made-in-Alberta initiative is designed to socially and economically empower Black youth so they can meaningfully contribute to Canadian society.



How to Address Black Peoples' Health

- Build trust
- Engage communities as fruitful actors
- Tackle anti-Black racism
- Consider the social determinants of health
- Build community capacity, including through mentorship
- Capitalize on the strengths of the community
- Intersectoral considerations including housing, immigration, etc.
- Build resilience --- e.g. through sports and spirituality
- Engage community and religious leaders
- Recognize the diversity of the Black communities
- Based on research evidence: Both quantitative and qualitative
- Black leadership



Build Trust

- Address governments and institutions lack of trust in Black people
- Address anti-Black racism
- Build long term relationships with Black communities
- Create social and economic conditions that allows for trust --- address socioeconomic inequities
- Adopt an anti-oppression lens
- Address perceived risks
- Collaborate with trusted members of the community e.g. religious leaders





Thank You

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