### Impact Analysis of COVID 19 on Mental Wellness of African, Caribbean, and Black People in Alberta

#### **EXECUTIVE SUMMARY**

**Emily Auger** Kira Conroy Taeve Farenick Lorielle Giffin Connor Guy Eric Huff Heba Iftikhar Kaitlin Jaffray Shaurya Kumar Yuanye Lin **Emily Lukacs** Sheril Macosso Michelle Maroto Alexis Mintak Kesia Muthuthotatil Ancilla Okafor Makenzie Parry Cassandra Pryer Hannah Riddell Mutaal Tahir

Department of Sociology University of Alberta April 2023

Report prepared by students, instructor, and teaching assistant of SOC 415:

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**Report submitted to:** Funke Olokude RSW, M.Ed., Executive Director, Ribbon Rouge Foundation

### **Executive Summary**

The COVID-19 pandemic has brought to light the pre-existing health inequalities and systemic racism that disproportionately affect marginalized communities, particularly those of Black and Indigenous backgrounds and people of color (BIPOC). These communities are at a heightened risk of experiencing adverse effects from the pandemic due to structural and systemic barriers in accessing healthcare (Phelan and Link, 2015). Racial discrimination exacerbates these health inequalities, as BIPOC individuals are more likely to experience higher rates of stress, anxiety, and trauma, which adversely affect their physical health (Kamp Dush et al., 2022). Therefore, it is imperative to develop targeted interventions that prioritize the health and well-being of marginalized communities and work towards creating a more equitable and just healthcare system for all.

Students of SOC 415 collaborated with the Ribbon Rouge Foundation (RRF) to examine the experiences of the African, Caribbean, and Black (ACB) community in Edmonton, Alberta during the COVID-19 pandemic. The Ribbon Rouge Foundation is a grassroots, not-for-profit organization based in Edmonton, Alberta that serves ACB people throughout the province by addressing the structural and social determinants of health inequity. The foundation uses the arts to promote health equity and social justice, as they focus on facilitating storytelling, community-engaged arts, and meaningful community conversations. They are committed to raising the voices of marginalized communities, particularly those experiencing health inequality, and to addressing the structural and social determinants that lead to poorer health outcomes.

Together with the Ribbon Rouge Foundation, we developed four research questions to guide the project:

- How have African, Caribbean, Black (ACB) community members in Edmonton,
   Alberta been coping throughout the COVID-19 pandemic?
- 2. What types of mental health supports and services (broadly defined) have members of this community relied on during the pandemic?
- 3. What factors demonstrate resilience within this community?
- 4. How might access to supports and services be associated with racism and discrimination?

To address these research questions, 18 University of Alberta undergraduate students conducted an applied research project, under the supervision of instructor, Dr. Michelle Maroto, and teaching assistant, Lorielle Giffin. We first reviewed prior research to understand the conditions of healthcare for racial minority communities in Canada and used this information to inform the central research questions. We then used a mixed methods approach to quantitatively and qualitatively answer the research questions.

The study collected qualitative data through semi-structured interviews with members of the ACB community. The participants were contacted through RRF's email list, and the interviews were conducted by two students. The interviews were divided into five sections, which covered background, changes in the community due to COVID-19, support availability, support barriers, and support improvements. The interviews were transcribed and a flexible coding approach (Deterding & Waters, 2021) was used to analyze interview data using Dedoose, a quantitative data analysis software application. The analysis of the interview data resulted in the creation of nine main codes and 22 sub-codes that were then used to link participants' responses to the research questions.

We also collected quantitative data through the ACB Mental Wellness survey. This survey was conducted in collaboration with Dr. Maroto and the Ribbon Rouge Foundation, and

covered demographic information, COVID-19 experiences, mental health supports and barriers, and perspectives on the community. Data were collected from February 9 to March 20, 2023, with 303 responses received from various sources. After removing incomplete responses, 294 responses were analyzed using R, a statistical software, with descriptive statistics obtained for each survey question. The survey data were organized and re-coded prior to analysis, and the results were presented using tables and graphs.

### **Key Findings**

This project resulted in a trove of data from ACB community members regarding experiences with mental health during the pandemic, barriers to accessing traditional mental health services, different coping strategies used, commentary on the resilience of the larger ACB community, and descriptions of racism present within health systems. We describe our key findings below in relation to each research question.

# 1. How have African, Caribbean, Black (ACB) community members in Edmonton, Alberta been coping throughout the COVID-19 pandemic?

The COVID-19 pandemic has had a large impact on the ACB community in Edmonton, AB, affecting multiple aspects of their lives. Respondents reported declines in mental health and increased feelings of loneliness and anxiety throughout the pandemic. They also described struggling to meet expenses with the pandemic affecting financial wellbeing.

- 39% of survey respondents reported their physical health as worse off, 31% reported no change, and 29% reported improvement.
- 44% of survey respondents indicated that their mental health was worse off during the pandemic, 27% reported no change, and 28% reported it was better off.

- 38% of survey respondents indicated an increase in feelings of despair, 40% in feelings of fear, and 35% in feelings of loneliness.
- 59% of survey respondents indicated that they experienced increased feelings of anxiety and 50% reported increased feelings of stress, particularly related to health, finances, and stability.
- 86% of survey respondents claimed to have been partially financially affected by the COVID-19 pandemic and over 40% claimed to be financially worse off compared to the start of the pandemic.
- Beyond these individual situations, interview respondents described aspects of social disruption linked to COVID-19 changes in the community.

Despite these challenges, the community has shown resilience by developing innovative coping strategies to address their emotional, physical, mental, and financial well-being. This highlights the strength and resourcefulness of the ACB community in the face of adversity.

## 2. What types of mental health supports and services have members of this community relied on during the pandemic?

The utilization of traditional mental health services was limited among respondents, who reported that the primary barriers were cost and limited accessibility. Instead, participants emphasized the significance of self-care activities, such as exercise, meditation, and listening to music. They also described the importance of social networks and community and faith-based organizations for providing support.

- 35% of survey respondents reported accessing traditional mental health services.
- Among those who reported accessing traditional mental health services, 39% relied on talk therapy with a therapist or counselor and 28% received treatment from a doctor or hospital.
- Most participants who did not access these services reported not needing them.
   However, 31% reported cost as an issue, 29% indicated limited accessibility, 18% reported information barriers, 16% reported discomfort, and 10% indicated that their time was limited.
- Many survey respondents regarded engaging in self-care activities such as exercising (47%), meditation (22%), and getting enough sleep (36%) as an important step in taking care of their mental and physical health during the pandemic. The most common strategy was listening to music, with 62% of respondents indicating this as a vital coping mechanism.
- More broadly, community events and faith-based organizations helped respondents to maintain connections throughout the pandemic.

The results underline the importance of promoting alternative coping strategies and addressing the barriers to accessing traditional mental health services. They also emphasize the role of community and faith-based organizations in supporting individuals during tough times.

#### 3. What factors demonstrate resilience within this community?

The ACB community has shown resilience during the pandemic by adapting to the circumstances through the availability of accessible and affordable programs. Furthermore, the community has made strides in increasing mental health awareness and discourse within their culture.

- Survey and interview results emphasize the supportive and welcoming nature of the ACB community, the importance of community initiatives and events, and cultural adaptations as a result of the pandemic.
- 57% of survey respondents agreed that their community was resilient and 51% of respondents agreed that their community was supportive.
- 40% of survey respondents indicated they felt comfortable talking about their own mental health with members of their community, but 25% of respondents indicated they did not feel comfortable discussing their own mental health in their community.
- 60% of survey respondents agreed that their community was welcoming to newcomers and 74% reported that they could at least sometimes count on their community.
- 55% of survey respondents reported relying on friends, 53% of respondents reported relying on their partner/spouse, and 48% of respondents reported relying on their extended family for support.
- Technology was also important for maintaining connections during the pandemic,
   especially through What'sApp and text messaging.

During the COVID-19 pandemic, resiliency often manifested as the ability to stay connected with one's community, engage in mental wellness activities, and access appropriate supports and services.

## 4. How might access to supports and services be associated with racism and discrimination?

We identified race-based prejudice as a major barrier to mental health support and services for ACB members in Alberta during the pandemic. Factors, such as the amount of support received by these groups, cultural competency of services, and discriminatory experiences when accessing support, were related to racism and discrimination.

- The ACB community faced both systemic barriers when accessing mental health supports, and experienced discrimination within their own community regarding seeking mental health care.
- Many individuals interviewed faced stigma and discrimination from within the ACB community, which acted as a significant barrier to accessing mental health support.
- Responses were also gendered. Participants shared that men in the community are taught to be strong, masculine, and self-sufficient, which often causes them to refuse the concept of seeking mental health assistance.
- Despite the increase in financial support for the ACB community during the pandemic, a
  portion of the respondents felt that they experienced discrimination in grants provided by
  the government as the eligibility for accessing these supports automatically excluded
  some members of the community.
- Many respondents identified the shortage of Black therapists and mental health
  professionals in Alberta as a major obstacle to accessing mental health services.
   Because culture and unique experiences of Blackness were crucial to these individuals,

- having access to Black professionals was a non-negotiable factor, thereby creating a significant challenge to obtaining support for these groups.
- The information about mental health services and related support was often not culturally tailored nor accessible, especially for non-English speakers.
- Information regarding mental health resources and support was not easily accessible
  and was mainly shared through formal networks that only catered to individuals
  associated with specific community organizations or workgroups. This presented a
  challenge, as information was intended to circulate more broadly through informal
  networks within the community.
- Some participants in the study reported discriminatory experiences when interacting with mental health professionals, either in their own personal experiences or in the experiences of others. Participants described how their experiences of racism were dismissed and were wrongly attributed to other factors.

Addressing such barriers would help to address many of the challenges posed by COVID-19 that resulted in decreased physical and mental health and increased financial challenges for many individuals within the community.

### Summary and Recommendations

This project focused on understanding the experiences of the African, Caribbean, and Black community throughout the COVID-19 pandemic. We examined aspects of health equity, barriers to accessing mental health care, racism and its effects on well-being, and the overall mental health impacts of the COVID-19 pandemic. By incorporating both quantitative survey data and semi-structured interviews with ACB community members, we were able to gain valuable insight into the areas of life that were most affected by the pandemic. These included

individual and community coping mechanisms for dealing with mental health issues, the most prominent barriers to accessing supports and services, and perceptions of community resilience and resourcefulness.

Based on these findings, we make the following five recommendations:

- 1. Increase advocacy promoting ACB-led and culturally competent mental health services
- 2. Expand advertising for existing mental health services and programs
- 3. Provide opportunities for mental health practitioners (MHPs) to develop culturally responsive training
- 4. Expand mental health education in the ACB community
- 5. Support interaction across ACB subcultures and groups

We link these recommendations to specific barriers and issues that emerged from our findings. Lobbying for additional ACB-led and culturally competent mental health services will address the lack of culturally relevant or knowledgeable mental health services or service providers. Expanding advertising for existing programs helps to deal with the lack of knowledge concerning where or how to access mental health services that many participants expressed as a barrier to these services. Providing new opportunities for MHPs to develop culturally responsive training will create new career options and expand access to culturally competent providers. Expanding mental health education in the ACB community more broadly will help to reduce stigma around accessing traditional mental health services and provide opportunities for community to share their own support strategies. Finally, supporting cross-pollination across ACB subcultures by creating events and resources to increase interactions between ACB subcultures will address the perceived separation of ACB subcultures within the community.

In many cases, these recommendations, all based on the findings from this project, mean expanding the work the RRF is already doing within the community. They highlight the importance of RRF programs, such as the Knowledge Hub and OtherWise podcast, that emphasize education and spreading awareness. They also illustrate the need for more research

on health equity, racism, and discrimination, which is central to the Ribbon Rouge Foundation's mission and values. Our research shows that even though many members of the ACB community in Edmonton struggled during the pandemic, community supports and organizations were important for supporting mental health and keeping people connected. Expanding these and providing additional funding for them would greatly benefit the community.

Finally, the Executive Summary and Full Report outline broad findings across the ACB community in Edmonton, with a focus on the community as a whole. However, this is only the first step in addressing the key research questions behind our project. The ACB community is a large and diverse community and experiences likely diverged across individuals from different backgrounds. In addition to race and ethnicity, gender, immigration status, LGBTQ2S+ identification, and family structure are all likely linked to experiences with mental health and barriers to accessing services. They also intersect and overlap. Additional analyses that disaggregate these findings across groups and present a more intersectional discussion will help to expand our understanding around access to mental health in this community. We look forward to building on these in the future.