

COVID-19 and Refugee Families in Montréal: Strategies for Reaching Hard-to-reach Populations in Health Emergencies

RESEARCHERS: Nicole Ives¹, Jill Hanley¹, Marjorie Rabiau¹, Paula Kline², Janet Cleveland¹, Hend Alqawasma¹, Arwa Nofal², Oula Hajjar¹, Lina Abdullah, and Jilefack Amin Ngami¹

AFFILIATIONS: McGill University¹ and Montréal City Mission²

RESEARCH PARTNER: Montréal City Mission

KEYWORDS: Syrian refugees, integration, health emergencies, public health information, public health messaging, social isolation, COVID-19, phone surveys, Québec

WHAT THE RESEARCH IS ABOUT

OVERVIEW: This study built on the Québec segment of a CIHR-funded 4-year longitudinal study, Syrian Refugee Integration and Long-Term Health (SyRIA.lth), which explores the impact of pre- and post-migration conditions, sociodemographic characteristics, and migration pathways on integration trajectories and long-term health and mental health outcomes for Syrian refugees. This study examined the challenges Syrian newcomers in Montréal faced during COVID-19, their coping strategies, and the public health information they accessed.

OBJECTIVE: To identify the needs, vulnerabilities, and strengths of Syrian newcomers during the COVID-19 pandemic and to understand the resources Syrian newcomers mobilized in the face of the health crisis, including access to information through public health messaging.

RESEARCH JUSTIFICATION: The temporary suspension of data collection for SyRIA.lth due to COVID-19 presented an opportunity to engage participants from the study to gain an understanding of how factors such as proficiency in English/French, education, social networking, composition and structure of the family, employment status, housing circumstance, and income related to wellbeing during a public health crisis.

HOW THE DATA WERE OBTAINED

The research team conducted phone surveys in Arabic with 228 Syrian newcomers who were part of the SyRIA.lth study in Quebec. The survey questions covered issues such as sources and quality of information about COVID-19, household income and health status, challenges to adhering to social distancing guidelines, challenges related to education, coping strategies, and access to health services. The research team linked participants' responses to their existing household information in the SyRIA.lth database, including housing conditions, highest education level, language fluency, and income.

The sample represented a range of settlement conditions that provided greater or lesser access to more formal information sources (e.g., through settlement agencies) and informal networks (other newcomers, sponsorship groups). All participants had arrived in Canada between 2015 and 2017.

All participants received links to government-sponsored COVID information in Arabic.

WHAT THE STUDY FOUND

Concerns during COVID-19

- More than half of the participants (60%) were concerned with contracting COVID-19. Additionally, the pandemic created insecurities among Syrian newcomers around access to health care, work, and their ability to take care of family:
 - 46.5% of participants chose access to medical care as one of their top three concerns during the pandemic. The inaccessibility of health care was caused by clinic closures, services being unavailable, a lack of referral to the needed service, a change in how the services were offered, and a lack of knowledge of how to access the services they needed.
 - 40% cited the inability to work as their top concern; this was related to other concerns, such as the ability to obtain food or care for family members (e.g., by paying rent).
 - The inability to care for family members was the third most cited concern, with 40% citing it as one of their main concerns.
- Mental health, specifically related to social isolation, was also a significant challenge for Syrian newcomers during the pandemic. More than half (51%) reported difficulties with their mental health, particularly depression and anxiety.

Access to Information

- The majority of participants had heard about COVID-19 and were well informed about its dangers and health repercussions. Their source of information was mainly from social media (83%), conversations with family and friends (78%) and online news sources (75%).
 - Participants were somewhat critical of information they received from online news sources and social media (23%) and their friends (33%).
 - 52% strongly agreed that the information provided by the government and public health officials was reliable, and 39% agreed to some extent.
- Participants did not rely on settlement agencies for information on COVID-19, likely because they had lived in Canada for more than 4 years and had lost contact with settlement agencies.

Changes to Lifestyle

- Participants strongly adhered to public health guidelines, with 94% indicating they had made changes to their lifestyle and daily activities. The majority indicated increasing levels of hand washing and cleaning (93%), avoiding social meetings and gatherings (89%), and avoiding people they did not live with (79%).
- However, only 11% indicated they were working from home in order to reduce exposure. It is likely that many participants were employed in an “essential industry” or other area where working from home was not possible. Supporting this, 43% reported that some family members were not able to self-isolate, with the overwhelming reason why (93%) being that they needed to continue to work outside the home.



RECOMMENDATIONS

- Public health communications to newcomers can be improved by utilizing social media and by providing information in a range of languages.
- Settlement agencies need to partner with health-, migration-, or faith-focused community entities to ensure that newcomers have access to information and resources beyond the first year of settlement.
- Access to mental health services needs to be a priority during health emergencies. Mental health services need to be socio-culturally attuned to the needs of families with refugee experience.
- Culturally attuned strategies for reducing social isolation among families with refugee experience should be developed in collaboration with refugee populations. Examples from during the pandemic included virtual psychosocial support made available to refugee claimant families and virtual play-based workshops for refugee children to provide them and their caregivers opportunities to explore and express their feelings regarding the pandemic.

[View Project Webpage](#)

ABOUT CYRRC

The Child and Youth Refugee Research Coalition (CYRRC) is a network of researchers, service providers, and government partners working together to produce and share research that facilitates the integration of young refugees and their families in Canada and beyond.

The views and opinions expressed in this article are those of the researchers and do not necessarily reflect the official position of the Child and Youth Refugee Research Coalition.

This research was supported by the Social Sciences and Humanities Research Council of Canada.



Social Sciences and Humanities
Research Council of Canada

Conseil de recherches en
sciences humaines du Canada

Canada



UNIVERSITÉ
McGill



Montreal City
Mission
communautaire de Montréal