

Access to health care during COVID-19 by immigrant and visible minority status

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Research Objective

- To examine difficulties accessing health care during COVID-19 among four population groups: non-visible minority native-born, visible minority native-born, visible minority immigrants and non-visible minority immigrants.

Methods

- Source of Data: Statistics Canada Crowdsourcing Data: Impacts of COVID-19 on Canadians—Experiences of Discrimination
- Dependent Variable: Difficulty accessing ten types of health services during COVID-19: 1) non-emergency surgery, 2) non-emergency diagnostic test, 3) appointment with a family doctor, 4) appointment with a medical specialist, 5) appointment for rehabilitative care, 6) dental care, 7) mental health care, 8) medical treatment, 9) natural medicine, and 10) emergency services/urgent care (0=no; 1=yes); Reported reasons for difficulties.
- Independent variable: Immigrant status and visible minority status combined to generate a new variable called ‘visible minority immigrant status’ (0=non-visible minority native-born; 1=visible minority native-born; 2=non-visible minority immigrant; 3=visible minority immigrant)
- Control variables: Need, predisposing and enabling factors associated with health care utilization e.g., discrimination, trust towards health care system, education, sex, rural residence, age, marital status, LGBTQ2, Indigenous identity, living arrangements, sense of belonging to a community, and any chronic condition.

Analytical Technique

- Logistic regression models

Main Findings

Compared to non-visible minority native-born, visible minority immigrants are:

- less likely to report difficulties accessing non-emergency surgery, non-emergency diagnostic test, dental care, and mental health care.
- more likely to report difficulties accessing emergency services/urgent care

Multivariate analysis of difficulties accessing health care services						
	NES	NEDT	ARC	DC	MHC	ESUC
Visible minority immigrant status						
Non-visible minority native-born	1.00	1.00	1.00	1.00	1.00	1.00
Visible minority native-born	0.96	0.74*	0.99	0.69***	0.98	1.12
Non-visible minority immigrants	0.99	1.02	1.05	0.92	1.03	0.87
Visible minority immigrants	0.55***	0.74***	0.56***	0.71***	0.77*	1.46*
NES=non-emergency surgery; NEDT=non-emergency diagnostic test; DC=dental care; MHC=mental health care; ESUC=emergency service/urgent care; *p<0.05, **p<0.01, ***p<0.001; Adjusted for control variables						

Reasons for difficulties accessing health care services by visible minority immigrant status					
		Percentage			
	Overall	NVMNB	VMNB	NVMI	VMI
Getting a referral					
Percentage	18	18	21	17	21
Odds ratio		1.00	1.24	0.99	1.22*
Contacting physicians/nurses for information					
Percentage	29	27	31	29	33
Odds ratio		1.00	1.21	1.07	1.33***
Waiting between booking and visit					
Percentage	32	30	34	31	40
Odds ratio		1.00	1.20	1.03	1.55***
Waited too long to get service					
Percentage	16	13	17	17	21
Odds ratio		1.00	1.21	0.90	1.69***
Not available at time required					
Percentage	46	47	49	41	43
Odds ratio		1.00	1.06	0.79**	0.85*
Transportation problems					
Percentage	7	6	8	6	8
Odds ratio		1.00	1.24	0.83	1.81***
Language problems					
Percentage	1	1	1	1	3
Odds ratio		1.00	1.01	0.66	2.68***
Cost					
Percentage	10	9	12	7	11
Odds ratio		1.00	1.44*	0.68*	1.43**
Total	16302	13027	825	1160	1290

Discussion

➤ *Why are there contradicting findings for preventive and mental care?*

Visible minority immigrants may be experiencing fewer difficulties, considering that many of them come to Canada from low income countries where health care system resources may be limited. In this context, perceived levels of difficulties accessing health care may be lower than expected among visible minority immigrants.

Some visible minority immigrants may not have adequate levels of health literacy, which are necessary to identify the lack of appropriate health care. This potential bias may be underestimating their difficulties accessing health care services.

➤ *Why do visible minority immigrants report more difficulties accessing emergency services/urgent care?*

Consistent with the literature visible minority immigrants may be facing difficulties in accessing immediate care, leaving them with no other option to address their health care needs, especially considering that discrimination against visible minorities increased during the pandemic. Some visible minorities are often reluctant to use health services until the situation becomes serious, which leaves them no choice but rush for help at emergency services, pointing to their realities of barriers to health care services.

➤ *Why are visible minority immigrants disproportionately affected by difficulties accessing health care?*

The reasons cited imply that both structural and personal barriers to health care services play a role

Conclusion

Visible minority immigrants are exposed to many factors that are associated with difficulties accessing health care during COVID-19

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