

# RESEARCH ON SYSTEMIC BARRIERS, VULNERABLE GROUPS, AND THE COVID-19 VACCINATION ROLLOUT

## FOUNDATIONS OF MISTRUST: HISTORIES OF SYSTEMIC RACISM AND DISCRIMINATION IN CARE SYSTEM

### PARTNERS WE ENGAGED WITH

FEDERATION OF BC YOUTH IN CARE NETWORKS

FSSBC FEDERATION OF COMMUNITY SOCIAL SERVICES OF BC

NEW HOPE

MAP - MULTI AGENCY PARTNERSHIP

KAMLOOPS IMMIGRATION SERVICES

MIGRANT WORKERS CENTRE

AMSSA - AFFILIATION OF MULTICULTURAL SOCIETIES AND SERVICES AGENCIES OF BC

### MARGINALIZED GROUPS OF FOCUS

SEX WORKERS

YOUTH IN-CARE & OUT OF CARE

MIGRANT WORKERS

### RELATIVE TRUST

NOT TRUSTED

BUILDING TRUST

### HISTORY OF MISTRUST

#### SYSTEMIC FINDINGS AND BARRIERS

#### SOME OF THE HISTORIES OF SYSTEMIC RACISM IN CARE SYSTEM / OVERVIEW

#### FEAR & MISTRUST

MW

It's rare that the govt contacts us to provide input on migrant and undocumented workers. They're not often the focus of policies and priorities.

SW

Years of systemic abuse. Scared and traumatized.

YioC

Being in and out of care, between different homes and inconsistent support. Poor history and experience with institutional systems.

#### POWER IMBALANCE

Work permit ties them to one employer - normalized power imbalance between worker and employer. Aren't given any information about healthcare or resources when they arrive in

Very little agency in many of the decisions that have affected their wellbeing.

For these young people, there is not a lot of agency in their life. They are mostly told what they have to do and the hoops that they have to jump through.

#### SYSTEMIC EXCLUSION

Migrant workers not captured in vaccination data - denominator often used is population registered for MSP

Left out, discriminated, and abused by institutional care systems.

Left out from consistent care. Lack of stability with providers of care.

### MISTRUST AND COVID SERVICES

#### SERVICE AND ACCESS BARRIERS

Lack of stability with caregivers, schools, social workers

MSP, Postal Code, Canadian Phone Number - registration and booking as barrier

Fear & inability to leave place of work

Fear of deportation in when providing personal info

#### CONTENT AND INFO BARRIERS

Trust sources from home countries

PHN & MSP requirements creating exclusive messaging

Misinformation via social media channels from home country

Lack of cell phone, computer, and online access

#### SERVICE AND ACCESS OPPORTUNITIES

Low-Barrier, accessible, non-ID required, close to residence/work vaccine clinics in familiar spaces

Meet people where they are

Employer-specific messaging to support and enable worker vaccinations

Providing informed and empowered access to health services

#### CONTENT AND INFO OPPORTUNITIES

Feedback-informed and targeted content

Content and credible info to come from community leaders

Role in provincial gov and HAs that sustains and supports community partner networks

#### KEY INSIGHTS ABOUT BARRIERS

Systemic mistrust can not be countered with digital content and traditional health service delivery

Service and content channels must come from familiar, non-institutional voices and platforms for trust and safety

Provide access to safe and inclusive services before communicating about them

Community orgs are working in with these most vulnerable groups to provide information and support amidst layers of mistrust

#### WHAT WE MIGHT CODESIGN

Ideal pathways to equitably accessing and understanding health information and services

Networks and pathways of information sharing and communication between community partners and government

Safe, accessible, and inclusive health content and information for clear expectation setting and trust building

Models for sustainable feedback and engagement with key communities and partners

### MISTRUST TO TRUSTED CHANNELS

### BUILDING TRUST & ACCESS

DRAFT