

# MIGRATION EXPERIENCES SHAPE ACCESS TO HEALTHCARE



## What did we aim to do?

- We aimed to understand how home, travel, and transit experiences shape immigrant women's needs, desires, and expectations of health services in British Columbia (BC).

## What did we learn?

- Traumatic experiences at home and while travelling increased the need for mental health and other services in BC; however, these experiences led to system mistrust and fear that impeded timely access.
- Moving to Canada resulted in greater barriers to healthcare for immigrant women, including long wait times and system navigation challenges. Many relied on community organizations to access care.
- Although some immigrant women expected healthcare access to improve in Canada, medical visits were uncertain, more costly, and disrespectful compared to those in home and transit settings.
- Some women found that testing, treatment, and health information, particularly those provided by community organizations, were easier to access in BC than in home and transit.

*When I came to Canada, I had the need to see a gynecologist because I came pregnant. Well, we have found out the situation here is that one cannot apply directly to a specialist doctor, but instead you have to have your family doctor refer you... in my country, one goes directly to the doctor one wants.*



## Who did we speak to?

33 immigrant women from December 2018-January 2020. At the time of each interview, participants

- Were between ages 18 and 41.
- Were permanent residents, citizens, or had experience of precarious immigration status as undocumented residents, asylum seekers, visitors, and workers.

## What are we calling for?

- Collaboration between immigration and health systems, immigrant communities, and immigrant-serving organizations.
- Community-centered and language-specific health system information prior to and upon arrival in Canada.
- Comprehensive health assessments that center migration experiences.
- Health provider training in trauma-informed practices and cultural humility, as well as time and compensation for providers to engage in this training.
- Funding for community-based organizations to expand service eligibility to include all immigrant women, regardless of immigration status.

\*The term *im/migrant* includes all immigrants and migrants, including those who arrive through permanent and temporary pathways or without official status.



Find the full paper here: <https://pubmed.ncbi.nlm.nih.gov/35963165/>

## About the IRIS Project



IRIS is a UBC and SFU research project housed at the Centre for Gender & Sexual Health Equity, in partnership with community-based im/migrant-serving organizations across Metro Vancouver. IRIS is a mixed-methods, community-based study which aims to understand patterns and determinants of access to healthcare for im/migrants in British Columbia, including sexual and reproductive healthcare, as well as COVID-19 related care.