

Perspectives on Health & Well-Being in Black Communities in Toronto

Experiences through COVID-19



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In the fall of 2020, the Black Health Alliance launched a series of community consultations to hear directly from Black Torontonians about their health.

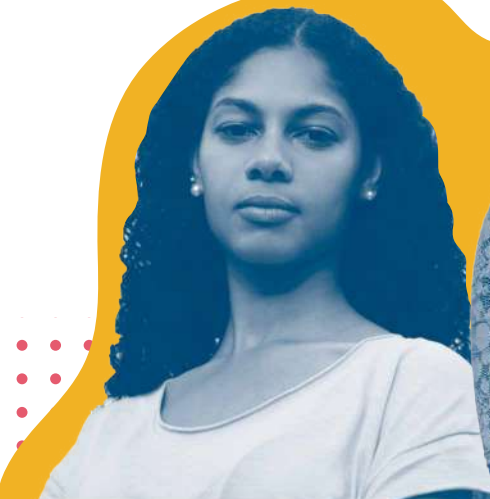
The impacts of COVID-19 necessarily dominated these conversations. People told us about their experiences with COVID-19, their fears, their anger, and their hope.

We talked to more than 75 residents, healthcare providers and frontline workers about their experiences. We surveyed an additional 121 people from Toronto (101) and from across the GTA (20).

Together they provide a snapshot of the experiences of COVID-19 for Black people in Toronto and the enormous impact of the pandemic on Black neighbourhoods in the northwest and northeast of the city, where transmission rates have been among the highest in the country.

“Are we amplifying
our voices?
I believe we are...”

“It takes small groups...
to really speak out and
advocate for the needs of
the community.
Without our voices, without
numbers, nothing
can be done.”



Who we talked to



People living in 5 neighbourhoods hardest hit by COVID-19

As part of the consultation we talked to residents from Rexdale, Black Creek, Lawrence Heights, Weston-Mount Dennis, and Malvern, ranging in age from high school students to seniors. We talked to people from diverse social and economic backgrounds, many of whom worked in frontline jobs.



Healthcare workers, community agencies and frontline staff

We also held two consultations with Black healthcare and service providers, including physicians, nurses, social workers, pharmacists, program managers and counsellors, as well as workers in public health, HIV, and harm reduction.



GTA-wide Survey

The majority of survey participants were between the ages of 35 and 55 years old and nearly 75% had post-secondary education (one third of participants had greater than a Bachelor's degree). Most identified as Black Caribbean/West Indian (29%) and Black African (20%) – just over half (55%) were born in Canada, and the remaining participants included 19 different counties of origin. Most of the participants (85%) were women and heterosexual (81%).



The Colour of COVID-19

Infection rates among Black people in Toronto are more than 2,400 per 100,000 – 3 times higher than white Torontonians.

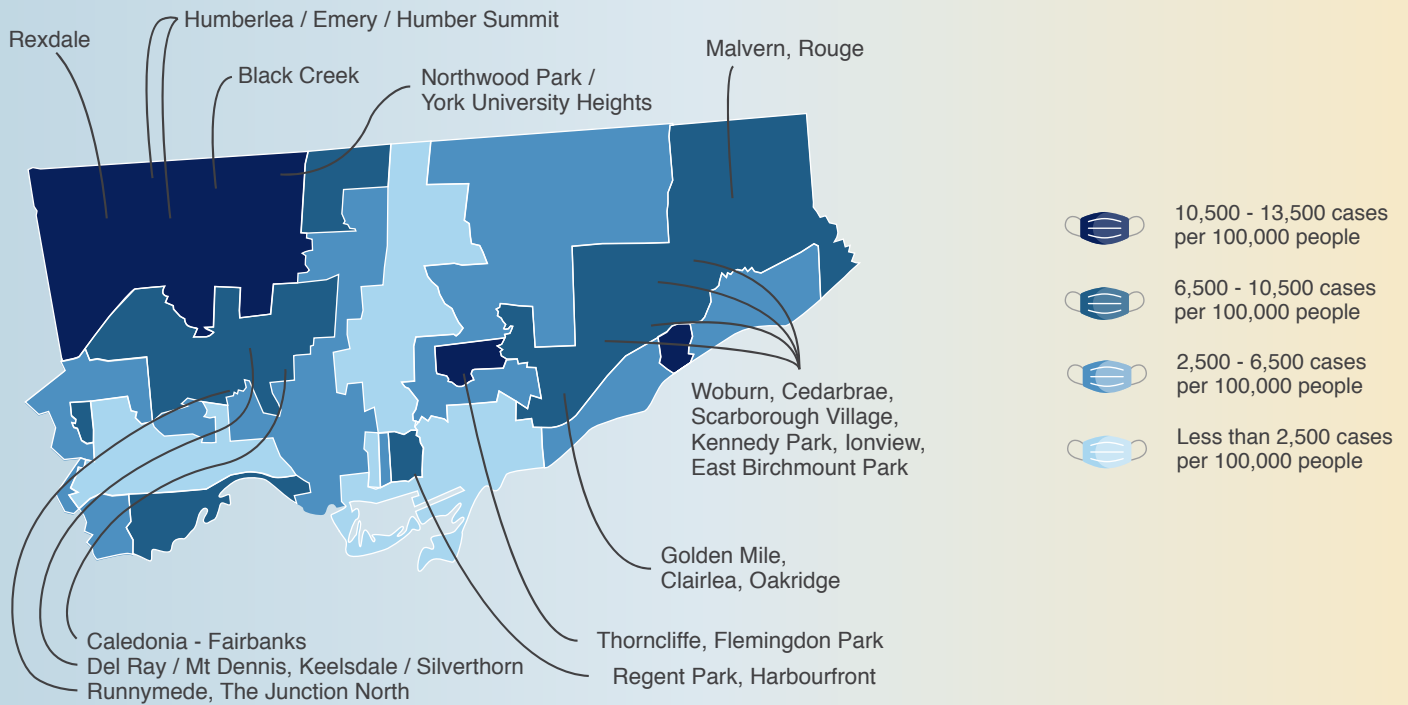
Racialized Torontonians account for 77% of all COVID-19 cases, 79% of hospitalizations. Public Health data shows that Black communities were the hardest hit in the first wave of the pandemic – peaking 33% of total monthly case rates in August of 2020.

But the story of the pandemic in Toronto is also a story of neighbourhoods – racialized, lower income communities where people are more likely to be essential workers. Many are counted among the working poor, with less access to sick leave, and fewer options to self-isolate. It is these neighbourhoods that continued to see steep increases in COVID-19, even as lockdown measures brought the virus under control in other parts of the city.

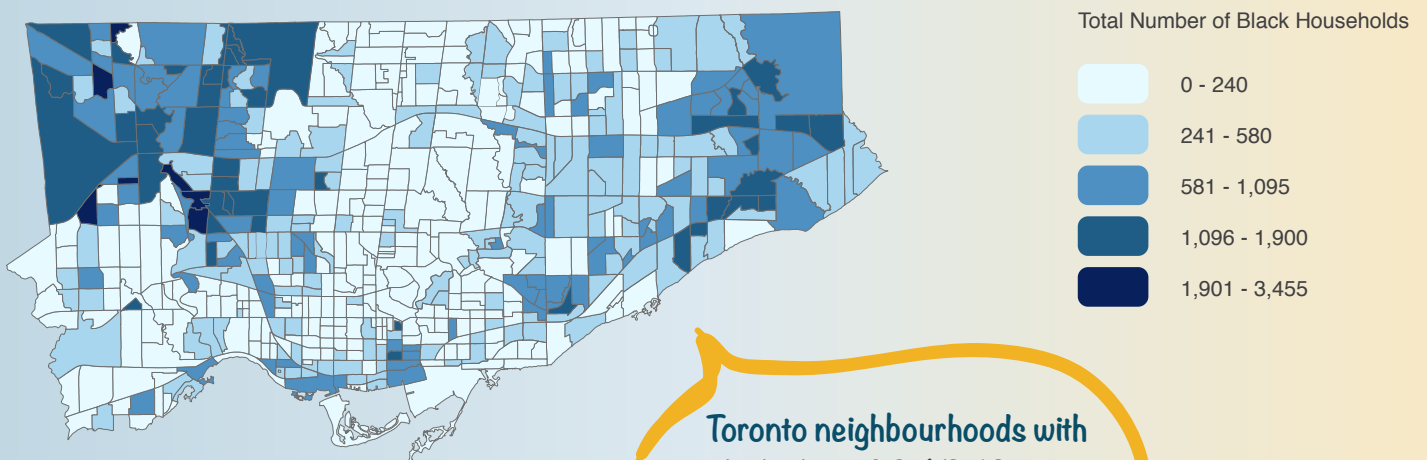


The Colour of COVID-19

COVID-19 cases per 100,000 by neighbourhood, as of June 1st, 2021¹



Where Black people live in Toronto (2016)²



Toronto neighbourhoods with the highest COVID-19 case rates also have the largest Black populations.



Pandemic response failed to protect Black communities

WAVE 1

Lockdown measures fail to have an impact on rising case rates in racialized neighbourhoods³

Provincial and City pandemic responses failed to protect people in Toronto's Black communities where people have fewer options to work from home or self-isolate when they get sick.

WAVE 2

Public health measures again fail to flatten the curve because of the underlying systemic inequities in Toronto's racialized neighbourhoods⁴

As COVID-19 rates again began to rise, essential workers were left to choose between their jobs and their health. Transit in the Northwest and Northeast of the city remained crowded and the virus spread more readily in high density buildings and among families in more crowded households.

With COVID-19 assessment centres concentrated in the downtown core, people in the inner suburbs had few options to get tested if they had an exposure or had symptoms.

VACCINE ROLL OUT

Vaccine access again favoured downtown affluent neighbourhoods, which have benefited from greater access, including pharmacy-based vaccination sites

Failure of the vaccine response to prioritize community-based options in higher risk communities has contributed to rising case rates in a 3rd wave. Racial inequities have led to further mistrust of the health



Call to Action

Toronto needs an equitable recovery strategy that responds to both the disproportionate impact of COVID-19 on Black communities and the systemic and structural inequities that have put these communities at greater risk.

MAINTAIN COMMUNITY-BASED TESTING AND OUTREACH

COVID-19 will continue to be a factor throughout 2021. Case rates in the Northwest and Northeast of the city remain high and people in these communities will continue to be at risk of exposure as the City's reopening plans send more people back to work and further crowd transit.

SUPPORT COMMUNITY-LED VACCINE ROLL OUT

Present day anti-Black racism, past experiences with the system, and a mistrust of COVID-19 response efforts that failed to meet their needs have all contributed to higher rates of vaccine hesitancy among Black people – a recent Statistics Canada report estimates that 77% of Black Canadians are 'not very likely to take the vaccine'.⁵ Community agencies have an essential role to play in order to address inequities in vaccine access that have already emerged in the initial phase of roll out.

EQUITABLE RECOVERY STARTS WITH COMMUNITY HEALTH AND WELL-BEING

Social and economic disparities have worsened as a result of COVID-19 with long term implications to Black communities' health and well-being. Coming into the pandemic, Black people were already disadvantaged and now face greater pressures because of income loss, income insecurity, as well as housing and food insecurity.

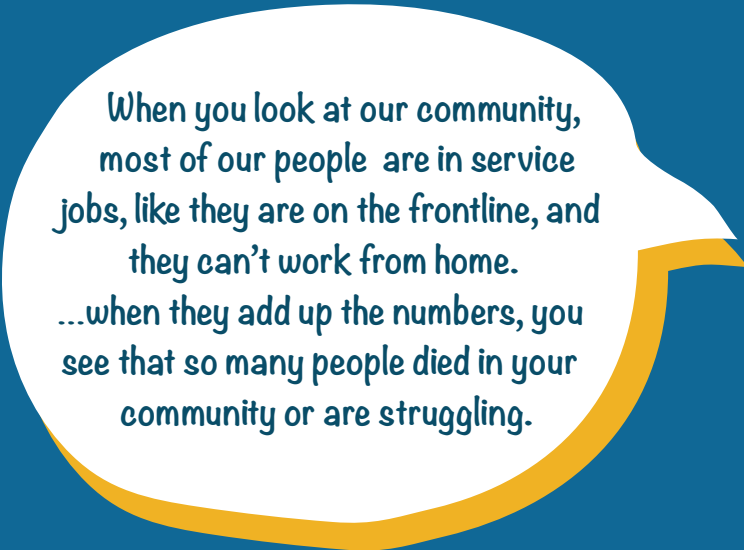
As COVID-19 recovery plans get underway, we need to ensure that interventions do not leave communities behind again. Communities in the Northwest and Northeast of the city need a longer term vision for renewal and sustained investment, with a focus on equitable access to healthcare centring on populations that have traditionally been underserved.





Hearing directly from Black communities across Toronto

People shared their experiences and reflected on what is most important to them and their health after months of lockdown during the pandemic. They told us about living in neighbourhoods where COVID-19 transmission rates are highest, and about the impacts of the pandemic on their income, education, mental health, housing and food security.



When you look at our community, most of our people are in service jobs, like they are on the frontline, and they can't work from home. ...when they add up the numbers, you see that so many people died in your community or are struggling.



7 reasons why COVID-19 hit Black communities hard

SYSTEMIC FACTORS THAT IMPACT HEALTH AND WELL-BEING BECAME RISK FACTORS FOR COVID-19

| PRECARIOUS & FRONTLINE WORK | JOB LOSS & REDUCED PAY | INADEQUATE HOUSING | ISING FOOD PRICES | SCHOOL CLOSURES | DEPENDENCE ON TRANSIT |
|--|--|---|--|---|--|
| <p>Fewer options to work from home and more likely to depend on jobs in unsafe working environments</p> <p><i>I think employers at times don't really consider that we need to be protected to get the work done.</i></p> <p><i>...I lost all 3 jobs at the same time.</i></p> | <p>Higher representation in lower paying jobs and disproportionate rates of job loss</p> <p><i>We see that prices are rising, people are losing their jobs, families can't provide, bills gotta be paid, supplements are not there, not too many resources to go to.</i></p> | <p>Significant number are living in unaffordable housing and higher risk of eviction</p> <p><i>We do as much as we can...the pandemic is making them frustrated, some are experiencing homelessness and some are in shelters.</i></p> | <p>Utilization of food banks and more people experiencing food insecurity</p> <p><i>...people asking for food bank appointments and doing that through me, rather than feeling like they can ask for help.</i></p> | <p>Less likely to send kids back to the classroom because of high transmission rates</p> <p><i>A lot of people in the Black community don't have the funding for laptops or internet access, which means that access to schoolwork is hindered.</i></p> | <p>Long commutes on busy transit, and greater barriers to access testing and other COVID-19</p> <p><i>...you're isolated, you have to go to work, the buses are crowded, you are hyper vigilant about COVID, being hand sanitized and distanced, which you can't even do because of crowding</i></p> |

WORK ENVIRONMENTS



INCOME SECURITY



HOUSING SECURITY



FOOD SECURITY



EDUCATION SYSTEM



TRANSPORTATION & TRANSIT



SYSTEMIC ANTI-BLACK RACISM

'Instead of supporting communities and acknowledging what has happened, it was a blame game'
'I just find that for people around me, if you go to the emergency room, you are treated differently.'

Community Voices

‘...it is such a different feel. You see people in High Park, walking their dog with their kids, then you go to Black Creek and no one is around, no one is out. If they are out, they are just getting their groceries and going home, it’s so different. It’s really sad.’

‘Do other people realize that Black Creek is experiencing a crisis?’



Neighbourhoods overlooked and underserved



As COVID-19 case rates climbed, mainstream public health messages didn't match people's experience in Toronto's Black communities. Crowded transit and high density has made it more difficult to self isolate and people watched as local services they depend on closed.

Particularly in the Northwest where COVID-19 testing sites weren't locally available, testing rates lagged behind other parts of the city until community agencies began regular testing in early Fall of 2020.



WHAT'S ON PEOPLE'S MINDS

Government talk but No action

« I think it's just a matter of showing face and making it seem like you're doing something, when realistically you're not doing much. »

Decisions aren't made in community's best interest

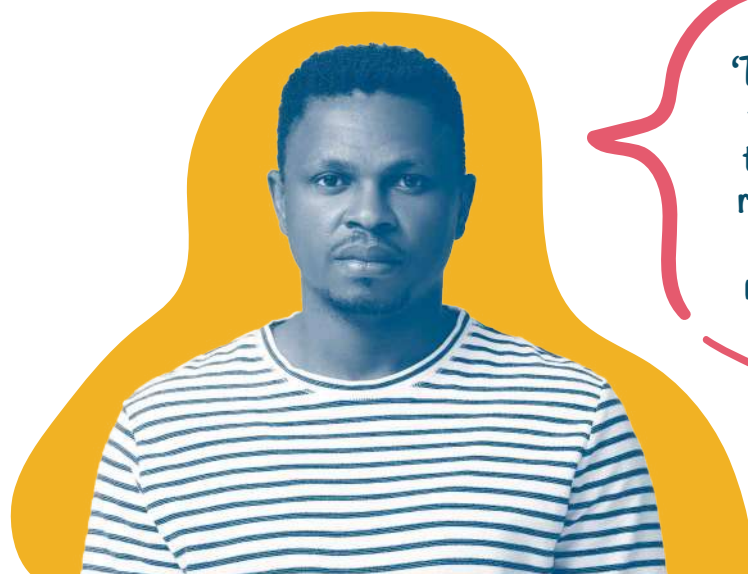
« ...sometimes decisions are not made with our best interest at heart for sure. I feel the same way, sometimes, that the government doesn't care about us. »

Communities have no say about closures

« The most important things that are supposed to be open are closed and the least important things that are supposed to be closed are open. »

Less access to support and fewer resources

« There's increased vulnerability during COVID because people's life experience is being overlooked... providers that largely serve Black and racialized, or marginalized populations are under-resourced. »



'The 35 bus - a lot of people still need to work to support their families, but there haven't been more buses on the road. It's still packed. There should be more buses... Little things like that make you notice that this area is less supported and less valued.'

Little direct communication, despite being labelled ‘hotspots’



People told us they heard that their communities were hot spots from the media and many expressed surprise and frustration.

Most said they relied on social media and personal networks for information on everything from healthcare, to lockdown measures, to school closures, but worried that informal networks were a hot-bed for misinformation.



WHAT'S ON PEOPLE'S MINDS

People are frustrated and trying to stay safe

« In terms of stress levels going up, people having wrong information about COVID – a whole bunch of things. It has affected the greater Rexdale community in that sense: mentally, financially. »

Dealing with mis-information

« I honestly don't know what to believe. I don't know what's true, they could just be saying this and that. Like I don't believe what the government says and I don't think they are handling it right. »

Information they're getting isn't specific to the community

« We're educating ourselves on Facebook and Google, which isn't the best source »

What they're being told isn't working

« We see that certain pockets of communities in Toronto...all of this information they are getting is not correct – cause it's not working. »

I don't feel like there's been much direct communication, I've just seen people on CP24, like, "We're locking down again. People, stop being selfish," but nothing directly towards our community.



Job loss and financial insecurity raise worries about food and housing



Over-represented in low paying jobs and ‘essential work’, Black people were more likely to lose their employment or have reduced hours.⁶

Without sick leave, people have to make choices between their jobs and their health - labour force data from the summer of 2020 shows that only 17% of people earning under \$17/hour received sick leave.⁷



WHAT'S ON PEOPLE'S MINDS

Adding to existing financial pressures

« ...I worry people are vulnerable to be compromised in a situation like COVID because people already worked to the bone... »

Self isolating in multi-generational homes

« My brother was working at a shelter and that was one of the first places that was hit really hard by the pandemic, so he had to quit his job. My father is immunocompromised so it's not safe for my brother to be in and out of the house »

The stress of depending on donations

« A lot of putting pride aside to get help. People weren't prepared – who could be prepared for what happened? »

« ...getting more stuff like groceries, food stuff, is very important. I haven't heard of any donations... »

CERB helped, but not everyone

« couldn't apply to CERB but I'm a student and took off this fall, and I couldn't apply for EI, I don't want to apply for Ontario Works because I am going to school in the Winter, but I want to work, I can't work »



‘I’m a hairstylist and I lost my job. I was off work for quite some time... I found another job right after and they closed down again. My daughter... her school closed down. That was frustrating because new people are scared to watch your child because of COVID.’

The challenge of finding support and resources



From mental health counselling to newcomer settlement services, people are finding it hard to find the resources they need, and local agencies are struggling to stay open or move their services online.

Food security is top of mind for many people. Black Torontonians are three times as likely to be food insecure and food banks in particular are struggling to meet demand – Daily Bread estimates a 200% increase in new clients during the pandemic across Toronto.⁸



WHAT'S ON PEOPLE'S MINDS

COVID-19 aid seems ad hoc and one-time

« ...they were a part of a program where they got food delivered and they only qualified for one time, or grocery store gift cards, qualified one time. »

Food supports are scarce

« Having access to food banks ...if it's an appointment, that's very hard to come by. COVID has made that 10 times worse. »
'The other day, I received a text about turkey. The second time I called – "I'm sorry, we're not accepting any more calls"...so you have to be on your toes. »

No single source for information

« ...a lot of the resources are hard to find. The resources that I found were not on Google, it was on Instagram, Facebook, reposting on Instagram statuses. It is definitely difficult. »

Community organizations struggling to meet demand

« A lot of people in the churches take care of some of the people ...before we were able to help other people, but if we were helping 5 people, now we are helping 15, and that puts a strain on us also... »

I've heard a lot of supports are a one-time kind of help. And yeah, it helps. But this is not a one time thing they are dealing with – it is their life. Week, to week, to week.



Community Voices

Mainly homeless people,
marginalized people, POC,
people in groups, what
does that look like?
Young Black men hanging
out, walking from school?
What does that look like?

There is a safety concern
with the police, so many
police out there because of
COVID and because of
them keeping the peace and
keeping the space. Who are
they really policing during
this pandemic?



Long-standing issues in neighbourhoods are getting worse



Black communities in the Northwest and Northeast of Toronto have long been calling for investment in community infrastructure - housing, schools and community safety - on par with other areas of the city.

Programs that are in process have been stalled by the pandemic, and the community is forced to wait while their needs grow. With youth unemployment already nearly 30%⁹, Black youth have been particularly hard hit by COVID-19, with fewer programs, fewer places to go, and fewer opportunities.



WHAT'S ON PEOPLE'S MINDS

Community services stretched thin

« It is a very small organization, that is very short staffed, very underpaid...the fires that they are putting out, it is hard to keep up with it. Including the increasing demand. »

Essential programs shut down

« A lot of the programs had been shut down immediately or were shut down till further notice. That affected people in my direct community. »

Fewer opportunities for youth

« What safe alternatives have they offered the youth instead of closing necessary programs? They haven't ... which is the unfortunate thing »

Safety and gun violence

«...community centres should be open to the youth cause when youths don't have things like that, they don't have nothing. »

'This year we lost out on a lot... it does feel like they don't care about certain communities - like they do Band Aid things here and there but, they needed to put the money towards helping these people and helping these kids.'

'Because of COVID, we can get a gift card for \$25. We need jobs.'



Mistrust, stigmatization, and anti-Black racism in the healthcare system



Many of the people that we talked to shared stories of anti-Black racism when interacting with the healthcare system during COVID-19.

Issues of stigma, mistrust and experiences of systemic racism have proven major factors in people's decision to get tested for COVID-19, and are likely to impact vaccination roll out without an acknowledgement of the experiences people in the Black community continue to have when interacting with the health system.



WHAT'S ON PEOPLE'S MINDS

People are wary of local health services

« ...one particular hospital where the entire community had traumatizing and discriminatory experiences in that hospital – that hospital has been synonymous with that »

Delaying or avoiding getting help

« There might be help out there, but a lot of people mistrust, so they don't, they might say "Oh it's not for me" or "that doesn't suit me" or "I don't want to be involved in that." They might be informed, but they don't have the trust. »

Black people don't get the same level of care

« Because as Black people, we already know that we are neglected when it comes to health, that doctors don't take us seriously...it's something that most of us deal with, and it's really hard. COVID just made that even worse. »

And they feel stigmatized

«So you suffer, don't go for help, that's one of the problems – that you mistrust. Same with police. Something happens, not wanting to go there, going to stigmatize you anyways. Look at you and say it's not real or blow it out of proportion. »



For one family, they never had multiple devices for kids in classes, they had to take turns – so instead of school trying to find out what is going on, they call CAS, like they didn't have supervision or the parents didn't care...

School closures and concerns about education



Many people we talked to worried that online learning would further disadvantage students in Black communities.

With high community transmission rates and the risks taking their children to and from school on public transit, an estimated **40% of families in the city's most racialized communities opted not to send their kids back to school** according to a September 2020 analysis, and were 20% less likely to choose in-class learning than families living in predominantly white communities.¹⁰



WHAT'S ON PEOPLE'S MINDS

Safety of reopening

« To be honest, most students don't want to go to school because of the pandemic...I don't go to school in person still. I can't. I don't really trust. »

Higher dropout rates

« ...they don't have the motivation to go school. It has affected my community really badly. A lot of my friends don't want to go no more. »

Access to devices

« ...people felt like there was a lot that they didn't know, like parents waiting for laptops. »

Fewer class options

« I'm in grade 12, too, so specific classes that I need in order to apply to university are limited. »

Fear of falling behind

« The number of classes are limited ... I was planning on taking a different type of math but they only have it in one specific quad and I am already taking another class that I need. »

Lack of motivation

« ...you can't get a lot out of the online portion, so a lot of students are not really going to want to go to school. I don't want to say that they will drop out, but they are certainly not attending. »

Fewer options for those who are most vulnerable



Seniors, newcomers, people living with illness, and those living with addiction have been among the most vulnerable during COVID-19, yet their stories are often overlooked in planning.

We need to acknowledge the diversity within Black communities and ensure access and targeted support for those that may be experiencing further isolation as a result of the pandemic.



WHAT'S ON PEOPLE'S MINDS

Newcomers

« The population I work with are very uncertain about what the future holds...People are scared, they don't know what to do, they are living in the means of what they can, it is survival mode. It's pretty shocking. »

Seniors

« Being a senior, I was told to go home and stay home. »

« Not having a routine anymore, that in itself takes away everything from you. COVID has affected me in many ways, I used to go to a meeting almost every day, go out... »

People with mental health issues

« I'm a post traumatic stress survivor. So I find that everything is more magnified. I'm more scared to go outside »

People with disabilities

« ...it has been extremely difficult, especially for folks with these multiple intersectionalities, to get help, or to be seen or to be heard. »

People who use drugs

« [We need] promotion of safe supply, overdose prevention and response directly in Black communities, access to harm reduction services, or Black organizations »

People experiencing homelessness

« We do as much as we can as it relates to employment settlement... the pandemic is making them frustrated, some are experiencing homelessness and some are in shelters. »



Doctors, nurses and healthcare workers talk about life on the frontlines

Healthcare providers and frontline staff shared their perspectives on Black health and health care through the pandemic.

I think we're dealing with two pandemics. Right now we're dealing with anti-Black racism and we're dealing with COVID...



Healthcare workers are seeing first-hand the strain on people's health...



People in Black communities are less likely to have a family physician and more likely to have pre-existing chronic health conditions that could put them at greater risk from COVID-19.

Our survey of over 100 Black people in Toronto and the GTA found that nearly a third of people rated their mental health as only fair or poor, and many reported pre-existing chronic health conditions. 12% told us they did not have a regular healthcare provider and more than 35% typically made use of walk-in clinics when they sought care.



WHAT'S ON PEOPLE'S MINDS

People not seeking or delaying care

« I have a lot of clients who don't leave the house, and they're scared to leave the house and I mean they're also facing a lot of anti-Black racism right now so they're scared on top of that... »

Increased need for counseling

« I have seen a huge increase in their need for counseling... just talking about what they need to do to protect themselves against COVID, food insecurity and all these other things that have come up »

Health conditions taking a backseat to COVID-19

« ...my counseling has been really nothing about diabetes, but everything else. And I'm booked all day, from the moment I start till the end. And it's because so many people are scared, ashamed and afraid. »

The toll on mental health

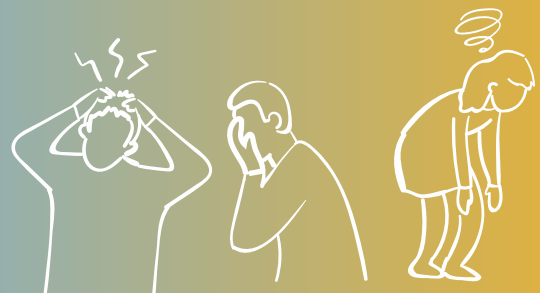
« ...I work with a lot of people who are newcomers who are isolated and mental health risks are much higher, this means overdose risks are higher »

'I work in a more European based [long term care] home and there is a drastic difference in the quality of care received, it is certainly higher.'

'I think this is when I fully understand the gaps in care for Blacks and visible minorities...'



‘Emotional exhaustion’ on the frontlines



People told us it was challenging to get the basic tools to do their work safely, and many raised concerns about the lack of funding for community care.

COVID-19 is our new reality, and many workers on the frontline told us they need more information and better access to personal protective equipment (PPE). Healthcare workers raised the importance of training and talked about burnout and ongoing demands of their jobs.



WHAT’S ON PEOPLE’S MINDS

Prioritizing community staff for PPE

« The first thing is not having access to PPE, some people are recycling PPE. It's sad to hear that a lot of people are having to recycle ... »
« it was just really challenging for us to have the tools to do our work safely and meaningfully »

Counseling and wellness at work

« Counseling is much needed in frontline work especially as we're working in teams that are affected by the overdose, the drug poisoning crisis and other needs that we're seeing in the community around seeking specialized services.»

Training to stay safe

« There are a lot of services or programs that are not making sure that their staff or whoever is on their team are trained or informed about COVID and what it is. »

Information necessary to support clients

« I don't think people are given the opportunity to be able to ask questions openly about what it is and how they need to be supported. »



I do know the program and service delivery model must change. If there is a lockdown, then procedure, schedule and protocol of how staff is deployed must be discussed...

‘Was there [an] emergency disaster protocol developed for these community systems?’

Community Voices



I felt that we weren't equipped in the hospital to really adequately support Black lives and I felt it was better for me to be on the frontlines with my community.

The Adolescent Mental Health emergency unit closed and relocated to take COVID patients. There were a lot of [mental health] units that were closed, and then simultaneously, we had the death of Regis Korchinski-Paquet. I was really impacted by her death...

So, for me, that's when I took the call to action, and I decided, you know what, maybe it's best for me to work on the front lines. I opened up my private practice in October and I'm seeing an increase of people from the ages of 25 to 35 that are suffering from the effects of racialization, a lot of anxiety, and a lot of depression, and uncertainty.

Equitable recovery starts with community health and well-being

Consultations invited free-ranging conversation about health, community and what can be done by organizations and governments to ensure an equitable recovery from the pandemic. People talked about the structural and systemic racism that has underpinned much of the COVID-19 response to date, and told us they hoped to see changes in their communities to build back after the pandemic with a focus on the social and economic factors that drive health and well-being in the Black community.

If we're solving COVID - or we're trying to solve COVID - you know the inequalities that we're experiencing as a community will not be solved, unless we really focus on anti-Black racism.



Community Voices

‘Will we recover equally post COVID-19? Because we did not start in the same place...’

‘My fear is that we will not have the evidence to show disproportionate impact, [they] will therefore be able to dismiss the impact on communities, and that we will not be able to plan accordingly when we are in a post-COVID moment about how communities – different communities – need to be enabled differently to recover equally.’



The Path to Recovery

Equitable recovery starts with a collective decision to support economic and social success of Black communities across Toronto.



1 Enabling local community providers to continue the fight against COVID-19

Investments in community-led COVID-19 responses need to be sustained throughout 2021. Local testing, culturally relevant outreach that combats misinformation, and access to emergency supports are essential for Toronto's hardest hit neighbourhoods. Community Health Centres and community agencies serving the Black community can provide leadership but require access to the resources available to other health providers.



2 Equitable, community-led vaccine roll out

Communities in the Northwest and Northeast of the city must be prioritized for community vaccination. Yet, while pharmacies in some of Toronto's richest neighbourhoods are piloting community vaccine distribution, not a single site was chosen in communities where COVID-19 rates are highest.



3 Community Recovery: long term vision and investment for health and well-being in Black communities

Recovery will not be achieved without dismantling the structural and systemic inequities that have led to poverty, poor schools and over-policing. We need a Toronto-wide vision and commitment to Black communities that includes:

- A Locally-driven solutions led by Black communities and designed by and for local residents based on their needs**
- B Sustained support for organizations that serve Black communities to increase access to health services and other community supports**
- C Investment and leadership across multiple levels of government**
- D Long term planning to coordinate interventions in housing, employment, community development and transit**

Community Recovery: what people told us would make a difference

Culturally relevant COVID-19/ vaccine information and care

Equip Black service providers with culturally relevant information and ensure they have sustained support and resources to increase services.

« We also need to know how to support our clients with the information that they need to be able to be informed about this virus. »

Community building

Develop public forums and neighbourhood committees with direct input into COVID-19 recovery strategies.

« People need to talk about stuff more, they are not talking authentically or from an honest space, we should be able to talk about our grievances. »

Easier access to resources

Develop a centralized community information platform for resources and increase outreach via social media and other channels to increase awareness.

« It would be super dope if there was a website that was devoted to Black health. It could show you every type of drop in, food bank, anything you need... »

Access to healthcare and health literacy

Increased access to health resources including program listings in Black neighbourhoods, as well as culturally appropriate healthcare services.

« I believe that mental health, having an emphasis on that from a public health perspective, is going to be very critical. »

Training and safety for frontline workers

Ensure all frontline staff have the training and PPE needed to stay safe and increase mental health and other supports for frontline healthcare workers.

« The heart of every organization is the staff and we need to turn the spotlight inwards and heal. We, the agencies, need to focus on staff within, as that's the engine that fuels the population we serve. »

Race-based data collection and equity tools

Collection, coordination and accessibility of race-based data to inform planning and hold the healthcare system accountable.

« Racial equity tools can help to provide structure for considering the issue in COVID-19 pandemic practices...identifying which groups will benefit or be burdened by a given decision. »

Recognition that the Black community is not a monolith

Ensuring the visibility of LGBTQ, people with disabilities, and people living with mental health and addictions in planning recovery efforts.

«...one thing that I would love to see is for organizations to be more deliberate in including Black disabled folks, with visible and invisible disabilities, physical and intellectual – [they can] be at the mercy of the community planning »

Community safety

Investment in community safety in Black neighbourhoods experiencing gun violence, maintaining infrastructure and supporting programs to address underlying causes. Access to space and programming for Black youth and neighbourhoods at risk of or experiencing violence is essential.

« [We need] more security camera in common areas, and also a special counsellor who has ex-gang member experience so that if anyone has concerns about their kids being involved in gangs »

Mental health and counselling

Addressing stigma around mental health supports and ensuring counselling and resources are available to frontline workers.

« As much as mental health is coming up more, there needs to be more work done to A) be able to access help, and B) education around the facts so people don't feel embarrassed to get help. »

Educational supports

Supporting students, particularly those preparing for post-secondary education, to avoid falling behind as a result of the pandemic.

« I think getting to our youth and the children, making those connections, is something we have to work on, youth especially. »

Harm reduction

Responding to rising rates of opioid-related deaths in the city with sustained support for overdose prevention and harm reduction.

« I'd like to see...safe supply, overdose prevention and response directly in Black communities...Black organizations or any organization supporting people who use drugs...»





Acknowledgements

About Us



The Black Health Alliance is a community-led organization working to improve the health and well-being of Black communities in Canada. Driven by ground-breaking research and strong partnerships, we continue to mobilize innovative solutions with the goal to create lasting change in the lives of Black children, families and communities.

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