

Poorer physical health among those who experience discrimination in Canada

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With the projected influx of refugees coming to Canada, particularly with global crises such as the war in Ukraine, it is imperative to understand the health outcomes of refugees who settle in Canada.

A new study from the University of Toronto has suggested that the health of working age refugees—aged 15-64—is similar to that of

immigrants and Canadian-born individuals. More than nine out of ten of the refugees, many of whom arrived in Canada decades earlier, reported good health. These findings are in contrast to previous research in the US and elsewhere that has suggested poorer physical health outcomes among refugees, compared to those born within the host country. It is possible that Canada's [universal health coverage](#) may have contributed to the positive health outcomes among refugees in the study.

Overall, race also did not seem to be a factor in physical health outcomes, with nine in ten racialized Canadians reporting good physical health, which was comparable to the White population.

One of the study's key findings related to the interaction between discrimination and health. Approximately 40% of refugees and immigrants and one-third of those born in Canada reported they had experienced some form of discrimination (e.g., racism, sexism, ageism) in the past 5 years. Refugees, immigrants, and the Canadian-born respondents who had not experienced discrimination had almost double the odds of reporting [good health](#).

"Although the high prevalence of good physical health among refugees and immigrants is very encouraging, the strong link we found between discrimination and [poor health](#) underlines the importance of anti-discrimination strategies and trainings in healthcare and workplace settings." said first author, Alyssa McAlpine, a recent MSW graduate of the Factor-Inwentash Faculty of Social Work (FIFSW) at the University of Toronto.

Good [mental health](#) was the strongest factor associated with good physical health. Only 1 in 5 refugees in poor mental health had good physical health compared to 94% of refugees who were in good mental health.

"Our findings highlight that the mind and body is a continuum. It is important that doctors, [social workers](#), and other health professionals screen for mental illness and refer those who are struggling for treatment. There is strong evidence that a particular form of talk therapy called [cognitive behavioral therapy](#) is very efficacious with refugees as well as the [general population](#)" said senior author, Esme Fuller-Thomson, a professor at FIFSW and director of the Institute for Life Course & Aging at the University of Toronto.

Social support networks were also associated with physical health. Those who belonged to [social groups](#) or associations and those who were married were more likely to be in good physical health.

"Overall, our findings suggest the importance of promoting programs to improve social networks and opportunities for refugees" explained co-author Professor Usha George, Academic Director, Toronto Metropolitan Centre for Immigration and Settlement. "Greater social integration may be protective to the health of refugees, particularly those who are socially isolated."

Additionally, among refugees, women were more likely to report good physical health. In contrast, among immigrants, men had a higher prevalence of good physical health and among those born in Canada there were no sex-differences in self-reported physical [health](#).

Data within the study was retrieved from Statistics Canada's nationally representative 27th General Social Survey (GSS-27). In total, there were 17,082 respondents between the ages of 15-64, which included refugees (n=753), immigrants (n=5,063), and Canadian-born individuals (n=11,266). This paper was published in *Advances in Public Health*.

This publication is dedicated to co-author, Dr. Karen Kobayashi of the University of Victoria, Canada, who passed away on May 28, 2022. She

devoted her career to improving the well-being of immigrants in Canada and to mentoring the next generation of immigration scholars.

More information: Alyssa McAlpine et al, Self-Reported Health of Working-Age Refugees, Immigrants, and the Canadian-Born, *Advances in Public Health* (2022). [DOI: 10.1155/2022/9429242](https://doi.org/10.1155/2022/9429242)

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