Voices of Indigenous peoples living with chronic health issues during the COVID-19 era:

Experiences in Katarokwi (Kingston, Ontario area)
Background

Indigenous peoples in Canada as a group have higher rates of chronic health issues compared to other groups in Canada. This is related to social disparities – fewer opportunities to live well – and barriers to accessing services, due to the ongoing impacts of colonization and racism. COVID-19 has created additional challenges around socioeconomic factors, social wellbeing, and access to services, over and above those already faced by Indigenous peoples. However, Indigenous individuals and communities also have remarkable strength and resilience in the face of challenges. This comes from factors such as traditional culture as a powerful force for wellness, and from a traditional worldview that values strong relational community connections.

The KIRC-19 Project

The “Katarokwi Indigenous Resilience during COVID-19” (KIRC-19) research project sought to understand experiences during the COVID-19 pandemic of Indigenous peoples living with chronic health issues, and of service-providing organizations that serve such individuals, in the Kingston and southeast Ontario area.

The KIRC-19 team involves Indigenous community members, community service-providing organizations, and academic researchers from Queen’s, who have all come together in a partnership to do this research in a way that is ethical, respectful, culturally safe, and useful and beneficial for Indigenous peoples. We are guided by a set of principles known as OCAP – which stands for “Ownership, Control, Access, and Possession” in ethical research involving Indigenous peoples.

What We Did - Interviews with Individuals Living with Chronic Health Issues

One of the components of the KIRC-19 project was a study which sought to understand the impact of the pandemic on access to health and social services, and also the impact on holistic wellbeing, for Indigenous peoples living with chronic health issues. We interviewed 22 Indigenous individuals between November 2020 and February 2021, and analyzed the content of the interviews using constructivist grounded theory method of qualitative research.
What We Heard - Voices of Indigenous Peoples in Katarokwi

Factors impacting Indigenous wellness during COVID-19 in Katarokwi

Indigenous conceptualizations of wellness involve the interconnection and balance of spiritual, emotional, physical, and mental health, existing within diverse cultural, social, ecological, and cosmological realities, and in relationship with a strong sense of identity which links to culture and community. KIRC-19 research participants reported negative impacts on all of the above aspects due to the fallout from the COVID-19 pandemic and associated restrictions. They overwhelmingly felt isolated and spiritually or socially disconnected from the world around them. Many participants experienced fluctuating moods, amplified fear and mistrust, poor sleep, changes in eating patterns and hygiene, increased anxiety and depression, and increased substance use and self-harm. Importantly, several participants reported that their pre-existing chronic health conditions worsened during the pandemic.

Many factors contributed to poor wellness, before and during the pandemic. Cancellation of in-person community cultural events and ceremonies deeply impacted wellbeing through disconnection with culture and community. Isolation from friends and family due to physical distancing, the fallout from stay-at-home restrictions, and challenges in caring for Elders and other older adults or vulnerable family or community members in the midst of physical distancing restrictions, all caused significant stress which impacted wellness.

Unfortunately, some participants' loved ones passed away during the pandemic. Due to isolation measures, end-of-life experiences were disrupted, and several participants
were unable to grieve properly, cope with their losses, or properly experience and honour an important transition.

The socioeconomic impacts of pandemic-related restrictions – including income reduction and job loss – were notable in impacting wellness. For those caring for children, trying to balance home-schooling with work and other obligations caused significant stress.

Participants who had addictions and histories of trauma reported struggling even more with substance use as a way to cope with distress during the pandemic. Other participants reported stress-eating and over-exercising to reduce anxiety, while others smoked tobacco, or blocked out their feelings altogether. These coping mechanisms can have harmful consequences.

Despite the above, participants also noted factors that positively impacted wellness during the COVID-19 pandemic, by providing positive coping mechanisms to buffer distress. Engagement with community and cultural practices and ceremonies, in virtual and physically-distanced forums, was cited repeatedly as having a significantly positive impact on wellness, through enhancing a strong sense of personal and community identity which fostered resilience. Personal relationships and social support, similarly, were highlighted as very important to wellness and resilience. Spirituality, cultural practices, strength through identity, resilient personality traits, and other personal coping strategies were also noted during interviews.

**Barriers and facilitators to access to care for Indigenous peoples during COVID-19 in Katarokwi**
Barriers to health and social services access for Indigenous peoples pre-existed the pandemic, and include limited or lack of availability of: services that meet needs, services that are easily accessible, and services and resources that are affordable. Additionally, experiences of racism and other intersecting sources of oppression, and limited or lack of culturally appropriate and culturally safe services, are concerns that pre-date the pandemic. The pandemic exacerbated these concerns, and introduced additional challenges to accessibility such as longer wait times, cancelled services, and reliance on virtual care (which was a barrier for those without the necessary technology and/or technical knowledge, or without adequate privacy in their living space).

Programs and policies that address socioeconomic concerns were noted as being immensely helpful for promoting wellness by helping to address key social determinants of health. Programs and services that are accessible and meet needs, and that provide safe spaces for Indigenous peoples (including Indigenous women and two-spirit individuals) are also important factors promoting wellness. Participants emphasized the importance of Indigenous-led and Indigenous-focused programs and services, because they are more likely to be culturally appropriate and provide holistic care that may not be available elsewhere.

This study has been reviewed for ethical compliance by the Queen's University Health Sciences and Affiliated Teaching Hospitals Research Ethics Board (HSREB), and has received funding from Queen's University.

Suggested citation:

Questions? Comments? Interested in the full report? Please contact the Principal Investigator:
Dr. Amrita Roy, Queen’s University, E-mail: amrita.roy@queensu.ca

KIRC-19 Project Facebook page: https://www.facebook.com/KIRC19/