## THE COMBINED EFFECTS OF SYSTEMIC RACISM & COVID-19 ON RACIALIZED HEALTHCARE WORKERS

# The dehumanizing effects of systemic racism can lead Racialized people to experience psychological distress, which might include Moral Injury.

The norms and practices of the dominant white culture define what is deemed 'moral'. These norms are also the frame through which systems are established, managed, and preserved.

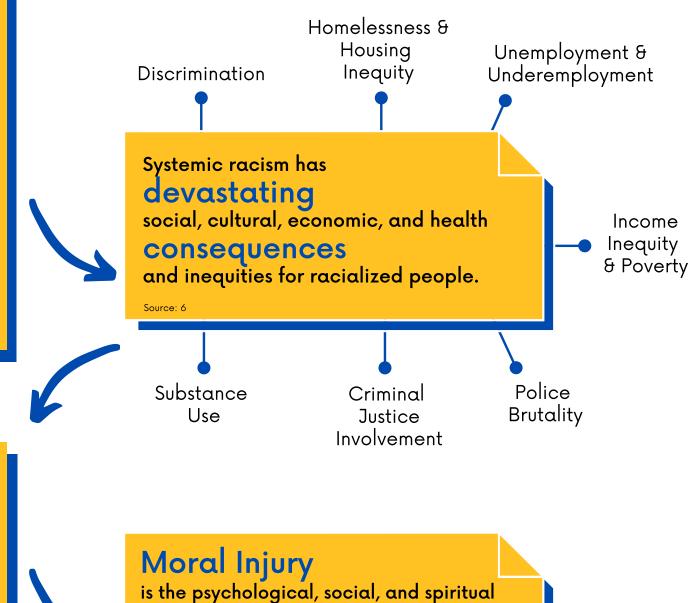
As a result, racialized people are often unfairly represented as immoral. They are continually monitored, managed, and held "in check" by policies, institutions, and structures.

This form of racial discrimination in every major societal institution is called Systemic Racism.

Sources: 1-5

The dehumanizing effects of systemic racism can influence racialized people's view of their own personal morality, and the morality of their communities. This can contribute to psychological distress, which might include

Moral Injury.

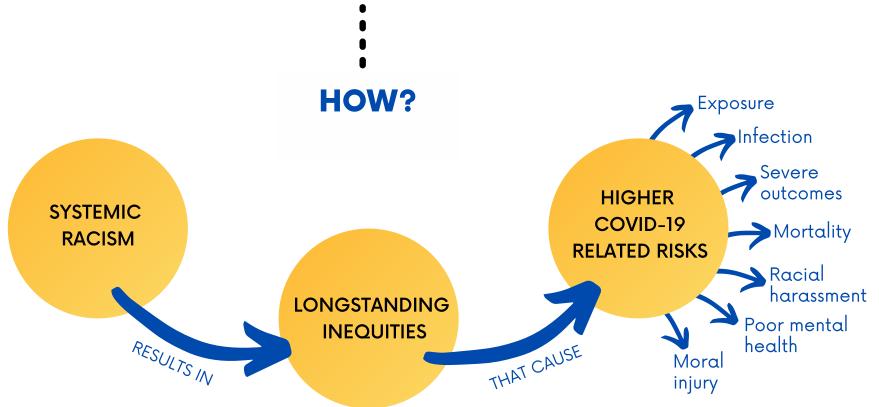


impact of extremely challenging

experiences that infringe on one's value system. If not addressed, it may lead to long-lasting psychological damage.

# The COVID-19 pandemic has amplified the impacts of systemic racism on racialized people.

Sources: 7-8





For more information, please visit MoralInjuryGuide.ca

# THE COMBINED EFFECTS OF SYSTEMIC RACISM & COVID-19 ON RACIALIZED HEALTHCARE WORKERS

COVID-19 has amplified the impacts of systemic racism on the physical and mental health of racialized people.

Racialized people are at a HIGHER RISK across these 7 domains:

#### COVID-19 EXPOSURE

Racialized people are at a HIGHER RISK OF EXPOSURE to COVID-19 because they are MORE LIKELY to:

Sources: 9-14



Experience income inequity 8 poverty



Experience housing inequity



Live in high-density neighbourhoods



Live in congregate housing settings



Use public Work 'essential service' jobs with greater transportation workplace exposure



#### **SEVERE OUTCOMES**

Racialized people experience inequities that increase their risk of developing chronic health conditions. As a result, they are at HIGHER RISK OF DEVELOPING SEVERE **OUTCOMES** when infected with COVID-19. Sources: 10, 11, 13

In Ontario, Canada, the most diverse neighbourhoods have:



**COVID-19 HOSPITALIZATION** RATES THAT ARE 4 TIMES HIGHER

than the least diverse neighbourhoods.

**COVID-19 INTENSIVE CARE UNIT** (ICU) ADMISSION RATES THAT ARE 4 TIMES HIGHER than the least diverse neighbourhoods.

#### 2 COVID-19 INFECTION

Racialized people are at a HIGHER RISK OF COVID-19 INFECTION.

Sources: 9-14



In Ontario, Canada,

**COVID-19 INFECTION RATES ARE 3 TIMES** HIGHER in the most diverse neighbourhoods compared to the least diverse neighbourhoods.

Source: 13

### **COVID-19 MORTALITY**

Racialized people are at a HIGHER RISK OF COVID-19 MORTALITY.

Sources: 9-14



In Ontario, Canada,

**COVID-19 MORTALITY RATES ARE 2 TIMES** HIGHER in the most diverse neighbourhoods compared to the least diverse neighbourhoods.

In the US,

compared to white people, COVID-19 MORTALITY RATES are:

3.7 X HIGHER for Black people 3.5 X HIGHER for Indigenous people 3.1 X HIGHER for Pacific Islanders 2.8 X HIGHER for LatinX people 1.4 X HIGHER for Asian people

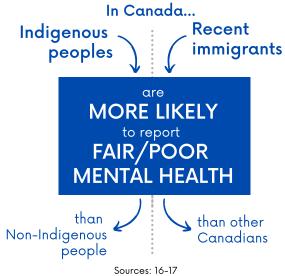
Source: 9



In Canada, during the COVID-19 pandemic, the proportion of visible minorities who identified an increase in the frequency of harassment or attacks based on race, ethnicity or skin colour was THREE TIMES HIGHER than the rest of the population.

Source: 15





Centre of Excellence - PTSD Centre d'excellence - TSPT

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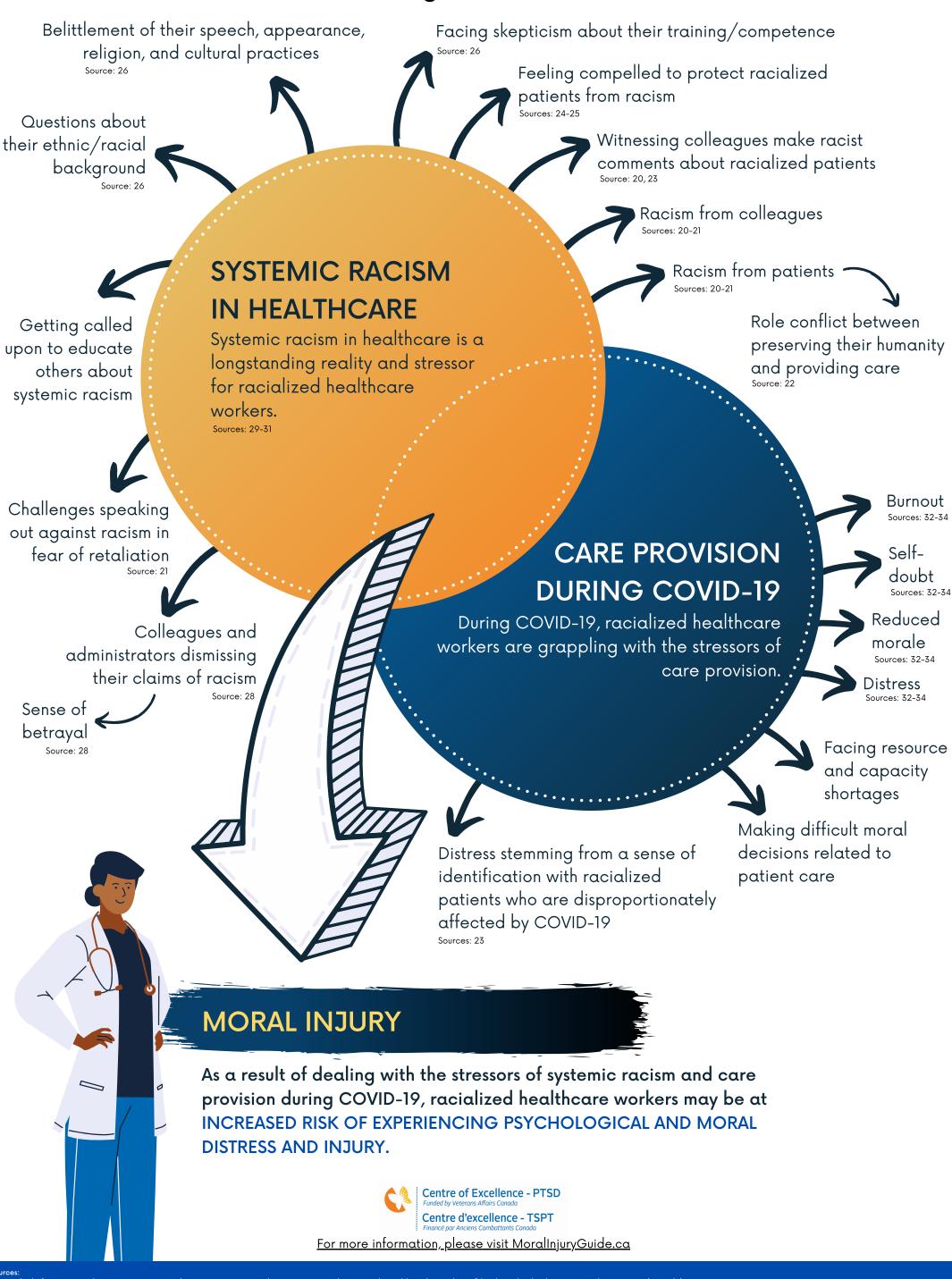
The continuation of acts of police brutality against Black people during the pandemic has prompted reckoning with the "complex struggle over the pandemic, racial injustice, and police brutality".

As a result, Black people are experiencing individual and collective exhaustion and moral injury.

Sources: 14, 16, 18, 19

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Racialized healthcare workers are grappling with the stressors of systemic racism in healthcare, and the stressors of care provision during COVID-19.



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