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## Letter to the Editor

## Asylum seekers working in Quebec (Canada) during the COVID-19 pandemic: Risk of deportation, and threats to physical and mental health



In the summer of 2017, faced with the new immigration policies of the United States administration, thousands of irregular migrants crossed the US-Canada border (via Roxham Road) to seek asylum (Barrett, 2018). The majority of these asylum seekers come from the Caribbean, Latin American and African countries (Immigration and Refugee Board of Canada, 2018), fleeing traumatic situations related to war, political persecution, community violence, precariousness, hunger, etc. (Cleveland et al., 2018; Nair, 2019). The largest group of these asylum seekers walked from Brazil to California through Peru, Ecuador, Colombia, Panama, Costa Rica, Nicaragua, Honduras, Guatemala, and Tijuana-Mexico (Cénat et al., 2019). As reported in this recent study, many of these asylum seekers experienced multiple traumas from their country of origin, their life in Brazil, while on the road and throughout their short stint in the US, to their final settlement in Canada. Indeed, it has been demonstrated that many asylum seekers have experienced childhood adversity, domestic violence, extreme poverty and precariousness, armed violence, rape, detention, human trafficking, social isolation, discrimination, racism and racial violence, as well as the death of loved ones while crossing South and Central America (Cénat et al., 2019). However, studies have also shown that despite different forms of traumas, refugees and asylum seekers build resilience not only through the social support they receive in their host society and communities, but also through the hope for a better future (Cénat et al., 2019; Gagnon and Stewart, 2014). Moreover, to facilitate their integration, programs have been developed to help build their resilience and allow them to better contribute to their host society (Pacione et al., 2013). At a time when the world is experiencing a challenging situation related to the Coronavirus disease 2019 (COVID-19) pandemic, this article examines the situation of workers seeking asylum in Quebec and the associated risks to their physical and mental health. This analysis is particularly important given that this pandemic has exacerbated social inequalities and that unfulfilled basic needs challenge the use of mental health care (Cénat, Dalexis, Kokou-Kpolou et al., 2020).

Shortly after the initial cases of COVID-19 were identified in Canada, the province of Quebec became the epicenter of the pandemic in the country. As of July 8, 2020, Quebec comprised 52.69% of the 106,434 confirmed cases of COVID-19 in Canada, although the province represents 22.57% of the national population (Government of Canada, 2020). Furthermore, 5,603 of the 8,737 deaths (64.13%) related to the COVID-19 pandemic occurred in Quebec (Government of Canada, 2020). About 92% of the deaths were recorded in the Residential and Long-term Care Centers (CHSLDs) and other residences for the elderly, where many health care workers were infected and some of which died (Institut National de Santé Publique du Québec, 2019). In the face of the difficulties related to the crisis caused by the spread of COVID-19 in the CHSLDs (e.g., lack of protective equipment, lack of personnel), a large number of permanent residents

and Canadian healthcare workers decided to exercise their right to withdraw their service. However, asylum seekers, who are mostly orderlies, continued to work in the CHSLDs (Jacobs, 2020), sometimes for more than 16 hours per day, often in two or more places. Lacking regular status and not knowing their rights, these asylum seekers continued to risk their lives to save others (primarily the elderly) from COVID-19. Furthermore, several asylum seekers have died trying to help Quebec save lives during the current pandemic. However, many of them have been victims of discrimination and racism related to their asylum status, both in the media and in the community.

While these asylum seekers continue to provide services, save lives and help Quebec cope with the COVID-19 pandemic, a question has been raised within Quebec and Canadian society: should the situation of these asylum seekers be regularized by obtaining permanent residence status? It is important to remember that the precariousness of asylum seekers' status is associated with severe health problems such as depression, post-traumatic stress disorder, anxiety, somatic disorders, as well as suicidal thoughts and behaviors (Cénat et al., 2019; Kronick, 2018).

What is happening to these asylum seekers in Quebec is not an isolated situation. Since the beginning of the pandemic, the United States has deported many people to the Americas, many of whom tested positive for COVID-19 at the time of their deportation (Cénat, 2020a). Although Canada from which many asylum seekers who entered via the Roxham road during the crisis of summer 2017 were deported, stopped deportations during the pandemic, it will resume them as soon as the crisis is over. In Quebec, many of the asylum seekers who are risking their lives in the CHSLDs have deportation warrants and should be deported at the end of the pandemic. The current pandemic is already related to significant uncertainty and worries which recent studies have shown to be associated with mental health problems among healthcare workers (depression, anxiety, insomnia, Post-Traumatic Stress Disorder (PTSD), psychological distress) (Pappa et al., 2020). Thus, in addition to risking their physical and mental health as well as their lives by working on the frontlines of the pandemic, these asylum seekers continue to face the anxiety of potential deportation.

The current pandemic situation, which is already increasing the vulnerability of asylum seekers (Bhopal, 2020), constitutes a significant threat to their physical and mental health. This is an issue that needs to be addressed quickly to facilitate the integration of these asylum seekers and prevent long-term mental health problems related to anxieties, worries, and uncertainties generated by both COVID-19 and their immigration status. It is by taking immediate action to regularize the citizenship of these individuals, known since the beginning of the epidemic as "angels of health", that Quebec and Canada will make them better citizens, that are resilient and able to contribute to the advancement and well-being of their host society. Similarly, culturally appropriate mental health care must be provided to help them in their

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integration after having experienced pre-and-post migration traumas (Cénat, 2020b). In the face of the pandemic, we battle it collectively, so let us be collectively resilient.

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The authors declare that there is no conflict of interest.

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