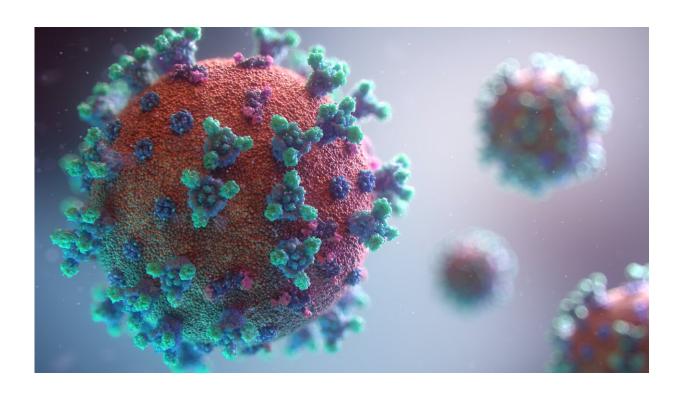


Studying ethnic minority and migrant women's struggles in accessing healthcare during COVID-19

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In their recent published paper in the interdisciplinary *Journal for Cultural Research*, Dr. Sabrina Germain & Dr. Adrienne Yong (Senior Lecturers at The City Law School) shine a spotlight on an area of the recent COVID-19 pandemic that has arguably been overshadowed



throughout this public health crisis—the effect the pandemic has had on access to healthcare for women at the intersection of their ethnic minority status and gender, and their migration status and gender.

Focusing on two distinct groups of women—ethnic minority women, and migrant women—Germain and Yong apply the theory of intersectionality coined by Kimberlé Crenshaw to investigate barriers to accessing healthcare in the United Kingdom as they have been particularly exacerbated by the pandemic.

Inspired by their reflection piece in the *Feminist Legal Studies*, which was the journal's fourth most downloaded paper of 2020, Germain and Yong sought to 'fill a gap in the research agenda' by adopting an intersectional approach to highlight the very unique and distinct experiences of ethnic minority women, and migrant women, as they attempted to access care during the pandemic.

This, they argue, had been overlooked because of the very nature of the women's intersectional characteristics, often being subsumed as just women generally, just ethnic minorities generally, or just migrants generally. This is the reason for their choice to focus on the two groups of women specifically.

The barriers faced by both groups of <u>women</u> overlap to an extent, and these were analyzed in the article. Three main barriers were identified as institutional barriers, community perceptions and socio-<u>economic factors</u>. Institutional barriers included those relating to communication and language, to the prioritization of COVID-19 patients in the NHS and legal barriers.

Community perceptions spoke to racialised medical perceptions and stigma and culture. Socio-economic factors were considered as environmental factors and health illiteracy.



Throughout the analysis, the underlying thread was clear—these barriers were not novelties from the pandemic, unlike the novel SARS-Cov-2 virus itself. Instead, Germain & Yong argued that the barriers to accessing healthcare were aggravated by the pandemic, and it was now time to address inequalities the <u>pandemic</u> was bringing to the attention, or risk a worsening of inequalities in future.

More information: Adrienne Yong et al, Ethnic minority and migrant women's struggles in accessing healthcare during COVID-19: an intersectional analysis, *Journal for Cultural Research* (2022). DOI: 10.1080/14797585.2021.2012090

Sabrina Germain et al, COVID-19 Highlighting Inequalities in Access to Healthcare in England: A Case Study of Ethnic Minority and Migrant Women, *Feminist Legal Studies* (2020). DOI: 10.1007/s10691-020-09437-z

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