



Exploring the impact of racism and ableism on accessing supports for immigrant and refugee families with neurodivergent children

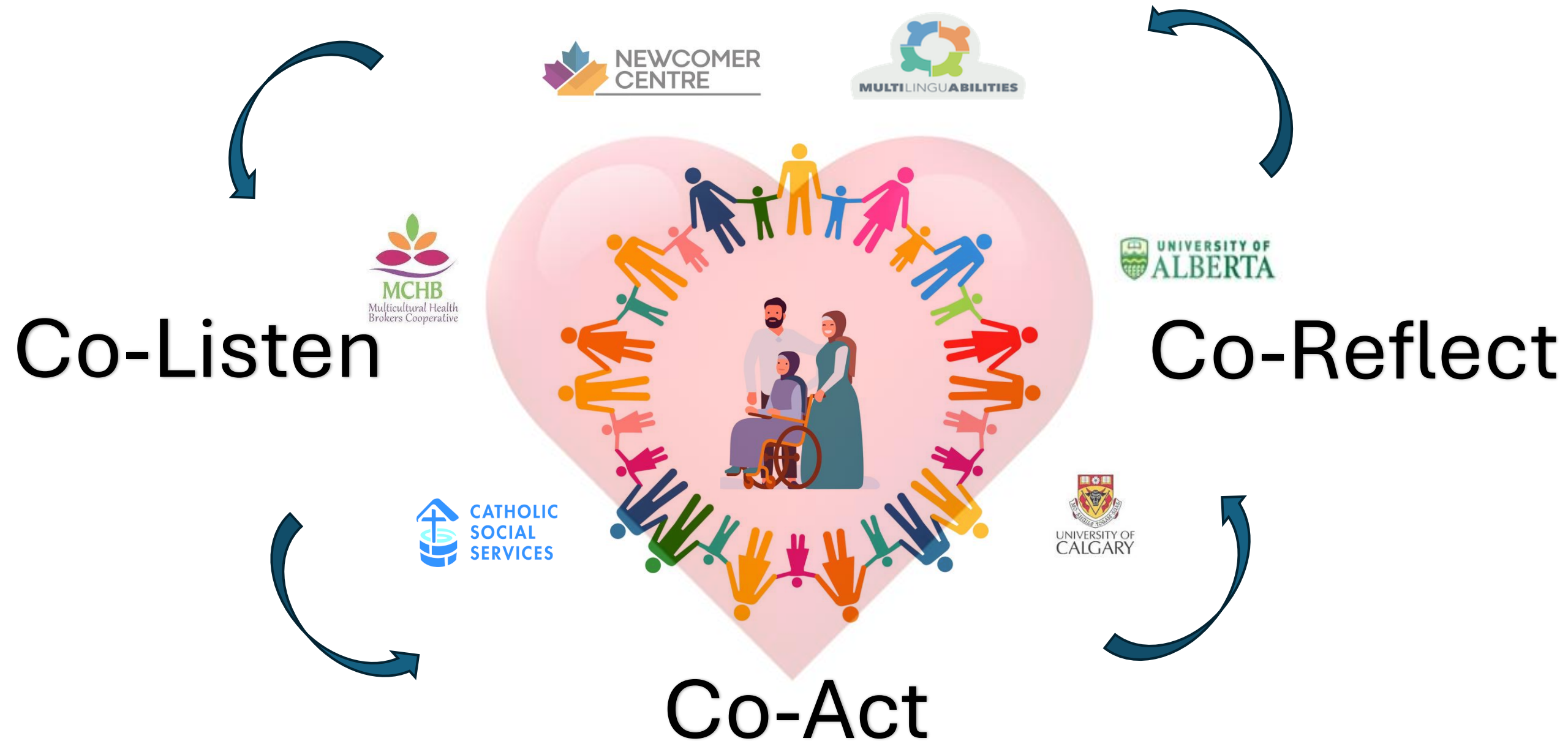
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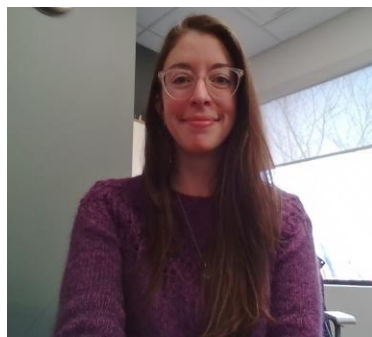
Land Acknowledgement

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- The background of the slide is white, decorated with numerous overlapping circles of various colors including red, orange, yellow, green, blue, purple, and pink. These circles are scattered across the top and bottom edges, creating a festive and colorful border.
- Thank you to all the families and community leaders/service providers who spent time sharing their stories and their recommendations for helping us to better understand how to engage in research
 - Thank you to our funder Social Sciences and Humanities Research Council for providing the funds to undertake this project.

Our Story



Our Team



Background

- Approach to examining the lived experiences of migrant families with disabled children
 - Largely oriented at looking at micro-level and the meso-level elements (i.e., gaps at the individual, interpersonal and organizational
- Recent growth in studies exploring the macro-level factors shaping lived experiences of migrant families with disabled children
 - Qualitative studies focus on how ‘dominant’ discourses anchored in racism X ableism shape the K-12 experiences of disabled children (Iqtadar, 2024; Park, 2023)
 - Qualitative studies unpack what discourses parents encounter as they navigate different institutions seeking supports for their child (Park 2023/2024; Raymod et al., 2022)

Looking closely at experiences of migrant families who have a neurodivergent child: Applying DisCrit Theory

- Tenets of DisCrit Theory (Connor, Ferri & Annamma, 2016)
 - Listens and incorporates the voices of marginalized populations
 - Values multidimensional identities and not singular identities (e.g., gender, citizenship, race, class)
- Focuses on how racism and ableism shape norms of how to act to participate in society.
- Perceives racism and ableism as social constructs but recognizes the material and psychological impacts of being labelled as raced or dis/abled

NORMAL



Methodology

- Approach: Relational action research approach
 - Focuses solely on exploring how we can improve our relationships with each other
- Method: Individual interviews with family caregivers & neurodivergent individuals
 - Interviews completed via Zoom, telephone or in-person based on participants' preferences
- Analysis: Use inductive approach to generate themes
 - Ensures emergent findings grounded in participants' voices





Results

Sample

- **Numbers:** 15 caregivers & 1 neurodivergent youth (13 families)
- **Ethnicities:** Largely Middle Eastern (e.g., Syrian, Iraqi), South Asian (e.g., Pakistan), Asian (e.g., Chinese), European (e.g., Ukrainian), Latin American (e.g., Columbian)
- **Age of children:** Toddler – young adult
- **Variety of differences among children:** Largely Autism, Cerebral Palsy, Down Syndrome, Speech apraxia,

Theme #1a: Navigating ‘deficit discourse’– As a child with intersectional realities

- Parent caregivers felt specific ‘deficit discourses’ of migrant children with disabilities were often adopted by service providers. As a result, this often resulted in the following outcomes:
 - Low expectations of what disabled migrant children could attain
 - Mutually exclusive binary definitions (e.g., you have a challenge versus not having a challenge) with little room for complex cases
 - Lack of supports for children with multiple identities (e.g., immigrant X Black X having a disability) due to multiple deficits



Trying to attain supports for child to reach potential

We were supposed to renew our services with [government]. Our home support team leader used some reasons to apply for more services for next year and then, the case worker, said, 'no'. The situation is like my son, because he's out five days a weeks and then at that time, he didn't know how to zip up his jacket. we feel like that's so important (to learn) because it's so cold here, if you know, how come he couldn't just get help We want him to be more independent and that's a life skill, so we use this as a main reason to apply for more specialized services and the [government] worker said no...and...said, 'some people don't even know how to zip up their whole life long', and that moment, I was so serious, almost crying, in fact, I didn't want that for my son.

[Parent]



Dealing with discourses that promote multiple deficits

That was one place where I felt racism, like literally, staring me in the face, especially when I had a specific meeting with the school district about transportation. Now that he was home school, that's when I started building the program, after, the center where he goes. So, those people needed to transport him and themselves to that program and back, and he would have been on the school bus system to go to school. So, I wanted that portion of funding transferred to this program. Because the school bus wasn't going to pick him up from home and bring him to [city] and back. But I needed the funding to come with him. So, that I could pay someone else to do that. The back and forth. And I felt that I think I was sitting in the school district, I'm trying to negotiate that. and somebody said something, I don't know what they said, but something like, 'whoa, we can't just do that for him', and I'm like, 'him who?' Like what exactly do you mean? Isn't he a student? Doesn't he go here? Isn't he paid? Like, what part of him are we now talking about? And I think for the first time, those words came out of my mouth, I said, 'oh you mean, him black, what'd you mean?' I think I was really pissed.

[Parent]

Theme #1b: Navigating ‘deficit discourse’– As a parent with intersectional realities

- Parent caregivers navigated dominant ‘deficit discourses’ that had the following implications:
 - Immigrant parents were often viewed as facing multiple challenges (e.g., language barriers, limited or no wayfinding knowledge) and having no assets (e.g., limited education) = resulted in providers imposing strong power imbalances that limit parents’ agency
 - Instills negative outlook of how parents can support their child and feeling ‘excluded’ from society





Navigating

At the beginning, they're [the parents] dealing with [settlement worker], she was very nice. A couple of months later, it would appear that the [settlement worker] is making a decision, and she would take over the decision without going back to them...So, they [the parents] would like [the settlement worker] to explain to them and know what's going, not just like [the settlement worker] deciding on something that they don't know about. So, they were really tired of being treated, like uneducated, that they don't know anything... They even told her that any decision that she wants to do, just come back to us. And as he said, he talked to her, at least send us a message, that you're doing some stuff. Just treat me as a person, who knows what they're doing.

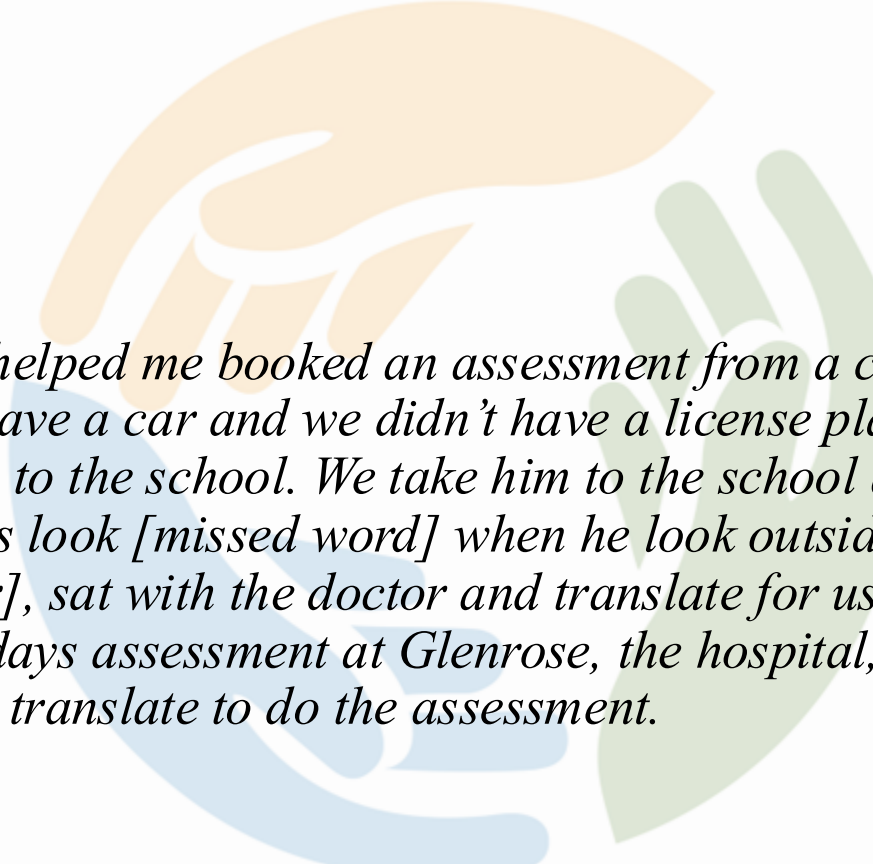
[Translated interview of a parent]

Theme #2: The power of assets

- Parent caregivers often used their own and/or community assets to navigate systemic discourses embedded in service delivery interactions. Examples of assets included:
 - Navigational competence – Educating oneself about the service delivery system (e.g., how to fill out paperwork, how to speak to providers, how to advocate)
 - Social network – Informal and formal cultural networks offer an array of supports (e.g., education, peer support)
 - Resistance – Not adopting ‘deficit’ discourses about their child or about their ability to gain skills to help their child.



Connected to a cultural health broker

A background graphic featuring three stylized hands in orange, blue, and green, arranged in a circular, overlapping fashion, symbolizing support and care.

[Cultural health broker], she helped me booked an assessment from a community. At that time, we don't have a driver, we don't have a car and we didn't have a license plate. So, she drive us to do all the assessment and to drive us to the school. We take him to the school and approve that program for my son and even when his eyes look [missed word] when he look outside. We also saw the eye doctor, [cultural health broker], sat with the doctor and translate for us. And, when they had the assessment, because it was 3 days assessment at Glenrose, the hospital, also, contacted [cultural health broker] and afterwards translate to do the assessment.

[Parent]



Theme #3: Recommendations for providers

LEARN PRACTICE IMPROVE

- Parent caregivers suggested tailored approaches that incorporates systemic influences with specific attention to:
 - Intersectional realities – recognizing uniqueness of each family unit and the interdependent relationship they have including the parent-child
 - Acknowledging the role of systems anchored in Whiteness and able-centered notions and its implications on the following elements
 - Policy - Eligibility criteria and parameters
 - Interpersonal interactions – Shapes expectations and schema of provider-parent relationship



Unpacking the system to find how we can get supports

You have to know, just to start off, that the system that we work with, what we deal with every day is white supremacist, right? So, it's all about control. So, power belongs in these two hands, and the rest of us have to bear for time, right? So, that's one thing. Another thing that is real is that policies are written for the masses. When you go reading a policy... I'm not reading the whole part where they're kumbaya-ing a lot, I'm reading where they say, 'accommodating', and then that's one thing, so that's one thing, knowing where the policy says accommodation. So, then, now it's up to me to translate that, because when they say, 'accommodating', they're not telling you how, when, why, which. They're just telling you 'accommodating', so that's where your own advocacy comes in... For the parents... be your best advocate... You have to translate policies for yourself. So, you look for all the areas that is ambiguous and then you feed it. Because they're not going to write it like that for you.



Questions & Feedback, please connect with us:

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