

Displacement, COVID-19, and Food Security: A Photovoice Study with Resettled Syrian Women in Kitchener-Waterloo, Canada

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Abstract

This paper examines the multiple ways forced migration and the COVID-19 pandemic shaped the food security experiences and food-focused activities of resettled Syrian women in Kitchener-Waterloo, Canada. Based on a participatory Photovoice study with 11 Syrian women, it explores how displacement undermines food security, including cultural food security, and why recovery remains difficult even after resettlement in a high-income country like Canada. Participants reported that forced migration from Syria disrupted their regular food practices and food consumption due to financial constraints and limited access to familiar ingredients, creating a persistent gap between food memories, rituals, and available diets. While resettlement in Canada increased food availability, many families still faced challenges in accessing healthy and culturally appropriate foods. The COVID-19 pandemic worsened these gaps through food inflation, mobility restrictions, social distancing requirements, increased financial pressures, chronic illness, and gendered care-based duties. It also disrupted food-centred social and religious rituals, such as communal meals during Ramadan and Eid. As primary caregivers in their households, women faced greater domestic pressures even as they developed new food-related coping strategies.

Keywords

COVID-19 pandemic, food security, cultural food security, gender, displacement and forced migration, resettled refugees, Waterloo Region, Canada

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Cover Image

A study participant preparing traditional Syrian dishes, *kousa mahshi* and *yabra'a*.



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Introduction

Displacement greatly impacts the food security of affected populations. The structures and routines of daily life, including food-related activities, are disrupted for refugees and asylum seekers, who are separated from their familiar food environments and the sociocultural contexts that shape their diets and food choices. Research has documented high levels of food insecurity among forced migrants in destination countries in the Global South, especially when they are placed in specific settings such as refugee camps, due to various barriers related to livelihood opportunities, financial resources, legal status, and local food systems (Nisbet et al., 2022). For example, a World Refugee & Migration Council report on Syrian refugees in Jordan found that over half were food insecure, with 30 per cent considered mildly or moderately food insecure (WRMC, 2021). A different study identified the various vulnerabilities of Syrian refugee women living in Greater Beirut, Lebanon, which structured their food insecurity (Abou-Rizk et al., 2021). An important question is to what extent third-country resettlement in high-income countries in the Global North, such as Canada, addresses the food security challenges faced by these forced migrants. As Gingell et al. (2022) have noted, “food is a critical element in the settlement process,” and food security is indicative of successful integration and resettlement in the receiving country for refugees. Despite being a decisive pathway to integration, less research has examined the comprehensive set of factors that hinder resettled refugees’ food security in these Global North contexts (Abdalla & Goulao, 2024; Wood et al., 2021).

Certain other key dimensions of migrant well-being, particularly cultural food security, have also received very limited attention (Onyango et al., 2025). The focus remains more on conventional food security, tied to access to sufficient, safe, and nutritious food, while neglecting the access and availability of culturally appropriate and meaningful foods (Renzaho, 2026). Another important, less-addressed issue is how broader complex crises, such as the recent COVID-19 pandemic, disrupted the socioeconomic integration of recently resettled refugees in the Global North contexts, particularly their food security. A new scoping review has claimed that “of the several hundred thousand peer-reviewed papers related to COVID-19 published during the pandemic”, only a few articles analyse how the food security of international migrants was affected, especially in high-income countries (Ahmed et al., 2023). This neglect suggests “a lack of research awareness on this subject” and “a disregard for the fact that food insecurity among migrants is also increasing” in these countries (Ahmed et al., 2023). In this paper, we aim to address these gaps by examining the case of Syrian newcomers resettled in the Waterloo Region of Ontario, Canada. The case of Syrian newcomers in the Waterloo Region is particularly instructive, as it combines a large refugee resettlement initiative with a smaller urban setting, where institutional supports and ethnic infrastructures are comparatively less developed.

We draw on findings from a study conducted with 11 Syrian women recently resettled in Kitchener-Waterloo, using a

participatory Photovoice approach. The study investigated the women’s food-related engagement and food security experiences, with particular attention to their cultural food security. We also examined participants’ food security challenges in depth during the COVID-19 pandemic and explored the gendered dimensions of these issues. We further considered food-related rituals and routines before and during the COVID-19 crisis to understand how migration and the pandemic affected these practices and participants’ food security. The paper argues that resettlement in high-income contexts does not eliminate the food insecurity of displaced groups. Rather, it transforms it, particularly through the erosion of cultural food security. The COVID-19 pandemic exerted a compounding adverse effect through reshaped purchase priorities, intensified gendered care burdens, and social isolation. Participants’ coping strategies for managing these broadened challenges are also analysed. Finally, we refer to the participants as ‘resettled Syrian women’ rather than ‘refugees’ or ‘resettled refugees’ to respect their collective preference for how they wish to be identified.

Syrian Conflict, Displacement and Resettlement in Canada: A Food Security Approach

The multi-faction civil war and armed conflict in Syria against the Bashar Al-Assad regime, following the pro-democracy uprising and Arab Spring of 2011, displaced large parts of the country’s population (Berti, 2015). Latest estimates from the United Nations High Commissioner for Refugees (UNHCR) show there were 5,952,174 refugees and 167,334 asylum seekers from Syria in 2024, many of whom lived in neighbouring countries, including Türkiye, Lebanon, and Jordan (UNHCR, 2025). In 2015, Canada launched a new resettlement programme for displaced Syrians, and by the end of March 2025, it had accepted 44,655 Syrian refugees and asylum seekers from other countries (Hamilton et al., 2020; IRCC, 2025; Oudshoorn et al., 2019). Between January 1, 2015, and March 31, 2025, Canada received 21,745 Syrians as government-assisted refugees, 18,965 as privately sponsored refugees, and an additional 3,945 Syrians under the blended sponsorship programme (IRCC, 2025). The resettlement of Syrian refugees was one of the largest initiatives of its kind organized by the Canadian government in the past decade, partly supported by private individuals and group sponsors (Hamilton et al., 2020).

In Ontario, approximately 2,000 Syrian newcomers were resettled in the Region of Waterloo between 2015 and 2019 (Vermeyden & Mohamed, 2020). Local community organizations, private sponsors, and settlement agencies played a crucial role in supporting Syrian refugees by providing housing assistance, language training, and access to education and healthcare (Cullen & Walton-Roberts, 2019; Ilcan et al., 2020; Walton-Roberts et al., 2019). Overall, many Syrian newcomers benefited from a welcoming environment and support networks, which eased their transition to life in Canada. However, many still face significant challenges to integration. Several studies have documented the range of social, economic, and institutional challenges faced by

resettled Syrians as they rebuild their lives across Canada, including language barriers, social isolation, difficulties accessing suitable housing and employment, income-related issues, and challenges related to cultural adaptation (Aldibat et al., 2021; Clark et al., 2024; Environics Institute for Survey Research, 2022; Li & Haan, 2025; Oudshoorn et al., 2019; Rose, 2019).

Food insecurity is a key challenge faced by resettled Syrians. Looking at the period before the pandemic, recent studies have found alarmingly high levels of food insecurity among Syrian refugees who have resettled in Canada since 2015 (Al-Bazz et al., 2024; Al-Kharabsheh et al., 2020; Vatanparast et al., 2020). A new study of a large group of Syrians living in Ontario for at least four years, with one or more children, found that almost half (45 per cent) experienced food insecurity in the past year (Zangiabadi et al., 2024). Food insecurity manifested as reduced food consumption due to limited food availability and financial hardship and was predictably higher among households with financial constraints and lower socioeconomic status. Food insecurity was often accompanied by higher levels of anxiety and stress. A smaller study involving 49 households in Quebec found similar results, indicating that over half experienced food insecurity, mainly due to challenges in accessing food, with privately sponsored refugees at greater risk (Chevrier et al., 2023). Another study documented food insecurity among 84 per cent of recent Syrian refugees in Toronto and Saskatoon, with the risk being roughly four times higher for low-income households. (Al-Kharabsheh et al., 2020).

Using Statistics Canada's Household Food Security Survey Module, Al-Bazz et al. (2024) similarly found that 77 per cent of Syrian refugee households in Ontario, Quebec, and Saskatchewan experienced food insecurity in 2021, compared with 19 per cent of Canadian households and 17.1 per cent of recent immigrants. Participants resettled through the Government-Assisted Refugees (GAR) programme faced a higher risk (80 per cent) of household food insecurity than privately sponsored refugees (62 per cent), with differences observed between those living in Saskatchewan and Ontario, and those in Quebec. Vatanparast et al. (2020)'s analysis highlighted the influence of both financial and non-financial factors on the food insecurity of resettled Syrians: challenges related to displacement and resettlement across multiple countries, including Canada; income levels within Canada; support from social networks and sponsors in Canada; and the affordability, accessibility, and availability of food at the local level.

Existing studies have documented high levels of food insecurity among resettled Syrians in Canada, mainly focusing on economic and access-related factors. However, three crucial gaps remain. Insufficient attention has been given to cultural food security. Limited analysis exists for smaller urban contexts, such as Kitchener-Waterloo. Very little understanding is available for the pandemic period. We offer additional insights into the determinants and characteristics of food insecurity among resettled Syrians in Canada, particularly during the COVID-19 crisis. We treat gender, food-related regular activities and sociocultural rituals, food memories, health and well-being, and cultural food security

as central themes to examine participants' food security and relationship with food in this paper.

Research Materials and Methods

This paper presents the findings of a participatory Photovoice research study with resettled Syrian women in Kitchener-Waterloo between February and March 2024. The study was part of a larger project funded by the Canadian Institutes of Health Research (CIHR) that explored the food security and health of recent refugee arrivals from Afghanistan, Somalia, and Syria, living in the Waterloo Region, particularly during the pandemic. The Photovoice research involved 11 Syrian women who had been resettled in the area in the few years before or during the COVID-19 pandemic. The lead author recruited participants with support from three community-based organizations actively involved in the local integration of Syrian newcomers: the Canadian Arab Women Association (CAWA), ShamRose for Syrian Culture, and Levant Canada.

Study participants came from diverse backgrounds and ranged in age from 21 to 45 years. Two of the participants arrived in Canada in 2016, although most were newcomers who had resettled with their families after 2020. Participants' household sizes ranged from three to eleven members. Seven of the 11 participants had no relatives in Canada, indicating limited social capital. Three of the participants were students, while six identified as homemakers not engaged in paid employment, primarily responsible for unpaid domestic and care work within their households.

The lead author served as the main facilitator for the study and organized four focus group sessions with participants (Hamzeh, 2025). Participants took photographs with their phone cameras to document their usual food intake and changes in these patterns after migration and during the COVID-19 pandemic. They collectively shared and discussed the chosen images in the subsequent group sessions.

Photovoice is a qualitative, participatory research method that empowers individuals, especially marginalized and underserved groups, to document and reflect on their lived experiences through photography (Alikhan & Jayatilaka, 2025). Rooted in feminist and community-based research approaches, Photovoice allows participants to express their perspectives visually, providing insight into complex social, economic, and environmental conditions that traditional methods might not easily capture. Photovoice emphasizes that participants are not just research subjects but co-creators of culturally sensitive knowledge. Participants are asked to take photographs representing meaningful aspects of their daily lives or the issues they face. These serve as prompts for interviews or group discussions, where participants explain the context, meaning, and significance of their images. This method highlights participants' agency and recognizes their lived experiences as a valuable source of knowledge (Annan-Aggrey & Arku, 2024).

Beyond data collection, Photovoice promotes dialogue, critical reflection, and collective learning. It is used alongside focus groups to validate and deepen understanding through

shared interpretation. The visual aspect of the method helps bridge existing gaps, making it especially effective for conducting research with marginal communities. Additionally, Photovoice's visual outputs can be exhibited publicly or used in policy forums, transforming private experiences into powerful tools for advocacy, education, and policy change. By placing the camera and thereby the narrative power in the participants' hands, Photovoice challenges traditional researcher-subject hierarchies and aligns with ethical commitments to inclusivity and empowerment in research (Budig et al., 2018).

Results and Key Findings

Next, we identify and discuss seven key themes related to food security and food practices to document and analyse the experiences of the study participants.

Theme 1: Displacement, Food Memories, and Cultural Food Security

Recent studies have shown that cultural food security is a neglected dimension of the food security of refugee and migrant populations in receiving countries (Gingell et al., 2022; Onyango et al., 2025). Cultural food security refers to the ability of individuals and households to access culturally appropriate foods linked to their ethnic and sociocultural identities (Mori & Onyango, 2023). As Onyango et al. (2025) have noted, food security for migrants and refugees encompasses more than access to an adequate supply of nutritious diets. The availability of familiar and preferred cultural foods is closely connected to the general well-being of immigrant populations through food memories. Food memories are individual and collective remembrances of food-related pasts which connect individuals and groups to their "respective ancestral histories, sociocultural identities, ethnicities, ways of life, tastes, and preferences" (Lee, 2023). These memories shape cultural food security by influencing food preferences and diets, as well as what foods people consider meaningful, nourishing, and culturally appropriate (Abarca & Colby, 2016; Holtzman, 2006). For migrant and refugee communities, food memories and consumption are also crucial in defining and shaping emotional well-being (McEwan et al., 2025). Food memories become more significant after forced migration as refugees enter new and unfamiliar environments where their cultural food availability, accessibility, or affordability may be limited.

Our study participants shared a similar cultural background and daily dietary habits in Syria. During focus group sessions, participants discussed the foods they regularly prepared and consumed in Syria, as well as their individual and household food preferences. They also discussed how exiting their country had affected their dietary habits. Most participants had fled to neighbouring countries, such as Jordan, Lebanon and Türkiye, with their families and lived there for some time before being resettled in Canada. Participants reported that accessing familiar ingredients and foods to make traditional and familiar dishes had been difficult since their displacement from Syria. They faced this challenge even when they moved to locations within the region where ingredients used in Syrian cooking were widely available in

the markets. However, they could not easily obtain the foods they used to eat regularly 'back home', mainly due to financial pressures and meagre resources. Many relied on food aid, which prevented them from preparing their preferred foods, as one participant explained.

Even though we were in a neighbouring country, where our ingredients were found quickly, we could not purchase them as often as we used to. We depended more on what we were given in food kits distributed by the government or other agencies.

A decline in their overall food security, including cultural food security related to access and consumption of cultural foods, was therefore a key result of their displacement.

Most participants experienced a lingering disconnect from their traditional, familiar foods even after arriving in Canada. Certain meals regularly prepared in Syria were no longer cooked after they and their families resettled in the Waterloo Region. Participants faced ongoing food-related challenges in Kitchener-Waterloo, especially with their familiar and preferred Syrian food. Initially, they struggled to find Halal meat and other Halal foods prepared in accordance with prescribed Islamic dietary laws. They also encountered difficulties sourcing certain vegetables, such as zucchini and cucumbers, since the varieties available in Canada differ in taste and shape from those found in Syria's local markets. Additionally, some spices, such as Syrian sumac, were not readily available in large grocery stores or supermarket chains. These common ingredients, frequently used in Syrian cuisine, were also seldom distributed in local food banks. Some participants mentioned that after integrating into the Syrian community in the Waterloo Region, they discovered Syrian or Arab grocery stores in the Kitchener-Waterloo area. Several Syrian refugees and other Arab migrants opened these ethnic shops selling Syrian and Arabic food products. Most participants regularly purchased groceries from these stores, especially Syrian-specific items. Although some felt that shopping at these Arab or Syrian stores was expensive, they continued to buy the higher-priced items, which were often only available in these ethnic grocery stores in Kitchener-Waterloo. Participants prioritized purchasing culturally meaningful foods from these stores, underscoring the high



Image 1: A participant preparing traditional Syrian dishes such as stuffed zucchini and stuffed grape leaves

value placed on maintaining food traditions even under financial constraints, as seen in Image 1. The image shows a participant preparing traditional Syrian dishes, including *kousa mahshi* (zucchini filled with minced meat and rice) and *yabra'a* (grape leaves stuffed with minced meat and rice).

Theme 2: COVID-19, Inflation and Food Security

The COVID-19 pandemic triggered “pandemic shocks” for migrant and refugee communities in Canada, resulting in multiple adverse socioeconomic consequences for these households (Ramachandran et al., 2024, 2025; Si et al., 2024). These various negative outcomes increased the monetary pressures on our study participants and their families, creating new obstacles for their food security. Many respondents expressed concern that the cost of living, particularly housing, had nearly doubled, adding financial stress to their households. The rise in prices for essential goods and services made it harder for families to maintain the same quality and quantity of food as before. One participant highlighted the increased cost of groceries due to food inflation: “A large gallon of oil from COSTCO was \$15 or something like that; now it’s \$55. We would get a bag of 20kg of sugar for \$14-16, now it would be \$27-28.”

Moreover, access to food markets was greatly restricted by curfews and lockdowns. Many participants relied on public transportation because they lacked access to other modes. During the pandemic, public transit services were limited, making it difficult to reach the markets and grocery stores. Participants’ specific cultural and dietary needs, such as halal food, required access to specialized markets such as Syrian or Arabic food stores selling ingredients used in traditional Syrian recipes, in addition to regular grocery stores. For households where women did not engage in paid work, the financial strain was more acute, especially when their spouses lost their jobs during the pandemic. These pandemic-related pressures had a detrimental effect on grocery buying for our participants. Participants reported shifting toward cheaper staple foods and reducing purchases of nutrient-dense items such as fruits and meat, demonstrating that COVID-related inflation directly affected dietary quality.

One participant, M.E., described how the COVID-19 pandemic significantly affected her family’s ability to buy food and the quantities they could obtain. “Before COVID, I was able to fill the fridge,” she recalled. The refrigerator was stocked with a variety of items, from meat and fresh produce to snacks and occasional treats for her family. Seeing a full fridge symbolized stability, routine, and the ability to care for her loved ones. But this changed dramatically once the pandemic hit. With rising living costs and growing financial uncertainty, M.E. found herself forced to make difficult choices about what she could afford. “After COVID, everything got more expensive, and I was only able to buy the basics,” she explained. She focused on purchasing only what was necessary, including staples such as bread, rice, and a few vegetables and was less able to include healthy foods such as meat, fruit, or special treats for her children. For M.E., the sight of a half-empty fridge became a symbol

of the financial strain her family faced as they adapted to a new reality centred on survival rather than having sufficient quantity and quality of food. Her images and description of a “full fridge” convey how food security is often experienced through everyday indicators of abundance and stability, while the “half-empty” one serves as a visible marker of the new economic pressures created by pandemic-related inflation and reduced incomes (Images 2 and 3).



Images 2 and 3: Our fridge before and after COVID hit

Theme 3: COVID-19, Food and Sociocultural Rituals

As a resource essential to physical, mental, and emotional well-being, food is a crucial part of cultural, religious, and social rituals for individuals, households, and groups. For migrant and refugee communities, food-related rituals directly contribute to their cultural food security by maintaining traditional foodways and preserving cultural identity in the destination settings (Arcadu et al., 2025; Wright et al., 2021). As Arcadu et al. (2025) note, “traditional foodways can play a crucial role in fostering resilience within immigrant communities, offering continuity, coping resources and a shared sense of belonging in the face of displacement and cultural adaptation.” Cultural food traditions are also vital to maintaining family and community networks and serve as cultural anchors for recently arrived and resettled displaced persons in high-income countries (Reddy & van Dam, 2020; Wood et al., 2021).

The COVID-19 pandemic undermined study participants’ cultural food security in other ways, by significantly weakening social ties, especially during important religious and cultural occasions such as Ramadan and Eid. For many Syrian families, Ramadan is a time for communal gatherings, shared meals, and breaking the daily fast with extended family and friends at Iftar. However, lockdowns and other restrictions disrupted these social traditions, creating and reinforcing social isolation. Many participants found it difficult to observe Ramadan without the usual mosque gatherings for prayers or to invite others to join Iftar, the nightly meal to break the daily fast. The communal aspect of Ramadan, which normally brings people closer, was replaced by solitary meals at home, limited to immediate family members.

The festival of Eid, which marks the end of Ramadan, was similarly affected. Eid is usually a time for celebration and social gatherings, involving visits with loved ones, gift exchanges, and food offerings for family and guests. It was extremely difficult for most participants to celebrate Eid during the pandemic due to strict social distancing requirements. Families could not gather as they typically would, and these measures made it impossible to visit relatives or hold large festive meals. Virtual gatherings became the new norm, but these could not fully replace the warmth and joy of in-person celebrations. For many, the loss of these rituals added to the sense of isolation and made an already challenging period even harder to endure. For other participants, the pandemic transformed sacred moments of connection into quiet, reflective experiences, forcing people to adjust to a new way of observing these cherished traditions.

Before the COVID-19 pandemic, family gatherings during Ramadan were an important tradition, marked by abundant meals and the company of loved ones, as noted by a participant, R.S. “Before the pandemic, I would prepare two or three dishes and something sweet for Iftar. Because of the financial problems brought on by COVID-19, I could now barely manage to cook one dish for the family.” The change was stark, not just in the food served but also in the absence of people. Before the pandemic, their homes would be filled with family and guests, but during the pandemic, it became

a much lonelier affair, with fewer family members present and no one to invite for the traditional shared meal. Images 4 and 5 depict contrasting scenarios of Iftar gatherings for R.S. and her household before and during the pandemic. While the decline in food variety and loss of social gatherings were tough for R.S., she found that preparing just one dish helped her maintain a healthier routine and required less time and effort than the multiple dishes she used to make. Some participants said that the daily fasting during Ramadan helped them cut their households’ food-related expenses.



Images 4 and 5: From breaking the Ramadan fast with family and friends to doing it alone

Theme 4: COVID-19, Gendered Responsibilities, and Care-work

Traditional gender roles are deeply rooted in Syrian society, especially concerning household chores. It is generally seen as inappropriate for men to do housework, such as cooking or cleaning, even if they are unemployed or working from home. Previous studies with recently arrived Syrians in Canada have shown that effective food provisioning reinforces gender-based roles and responsibilities related to food within these households (Vatanparast et al., 2020). Although the pandemic altered many aspects of daily life and increased domestic duties, these cultural norms remained strong in many resettled Syrian households in Kitchener-Waterloo, including the study participants, with most domestic responsibilities falling on women. It was expected that women, regardless of their work commitments or personal fatigue, would handle cooking and food preparation for the entire family. Even when children or teenagers in the household could help, it was usually only women, wives, mothers, and daughters who largely performed these tasks. This was also the case when male members were not working or were at home full-time due to COVID-19 restrictions; they were rarely expected to contribute to food-related work, such as cooking, cleaning, or other housework. This cultural divide placed additional pressure on women, who often balanced childcare, cooking, cleaning, and sometimes work, studies or training.

Meagher et al. (2020) have highlighted that pandemics reveal and reinforce “gendered vulnerability” because their severe socioeconomic impacts are disproportionately borne by women. New research shows that the COVID-19 pandemic strengthened the gendered division of labour within households globally, increasing workloads and creating a “crisis of care” for women (Camilletti & Nesbitt-Ahmed, 2022). This trend was also observed in Canada (Bolis et al., 2020; Robson et al., 2022). COVID-19 intensified these care-related challenges as family members, including children, stayed home more often, leading to higher food demands and a heavier household chore burden, most of which fell on women. Several participants lived in large households with more than six members, with two households having nine and eleven members, respectively. These participants had to continuously care for many family members.

These gendered expectations made the already tough circumstances of the pandemic even more stressful for several participants, as illustrated in R.S.’s case. A full-time student in the baking and pastry arts programme at a local college, she also had to manage her household duties and care for her children. Her husband was enrolled in a different training programme. R.S. and her spouse were retraining to better integrate into the Canadian workforce. R.S. explained that juggling training, studies, and domestic duties during the pandemic was overwhelming. “It was very hard with everything that was going on. It was very hard to keep up with studying, cooking, and taking care of the kids. It was a very difficult situation,” she remarked. She felt that these multiple responsibilities prevented her from giving her best and excelling at these various tasks.

The schedule of her classes disrupted the daily rhythm of the other household activities:

You know how it goes with lectures. You might have a lecture in the early morning, then have a long gap, and go back in the evening to continue, so it’s not my choice to choose morning or evening... I had 3 days... 4 days online, and I had 2 days in the lab when I went there [to the college].

While attending online classes, she also had to manage her children’s needs and split her attention among her studies, household chores, and her responsibilities as a mother. Image 6 shows R.S. multitasking by attending an online class while cooking a meal for her family.

Sometimes I turn off the camera or the sound to do something for one of the children, for example, because that’s what I’m doing. Then, when I get an order from the school or the teacher, I turn on the sound or camera and give my answers. I’m there, but I’m busy with something else.

Her classes were also scheduled during mealtimes, often lasting until 6 PM, leaving her with limited flexibility for meal preparation and serving. This demanding study routine had a detrimental effect on her household’s meals.

We could have lunch at 4 PM one day and at 8 PM another day. There was no schedule at all. Between the kids’ schools and both my husband and I studying, the situation was really... sometimes you feel like you have a lot of free time, other times you feel like you’re running and can’t keep up with multiple appointments.



Image 6: A mother, a wife, or a student?

R.S. also struggled with other regular tasks, such as grocery shopping. Long lines at the markets were particularly problematic, and with her many responsibilities, she did not have time to wait in queues. Other participants suggested ways to support R.S., such as delegating tasks like cooking or preparing meals ahead of time on days without lab sessions to ease her load. One suggestion was to cook meals that would last two days or rely on simple, ready-made foods like frozen pizza, allowing her more time to focus on her studies. However, R.S. shared that she did not buy processed food, as she believed it was more harmful than beneficial to her children's nutrition.

We didn't buy processed food even before the pandemic. We made everything from scratch. We didn't buy ready-made items. Not even bread. Sometimes we made bread at home, but we never bought frozen or ready-to-eat meals. And bought fresh meat instead of frozen ones.

Her preference for preparing fresh food from scratch is not only indicative of nutritional concerns but also underscores cultural expectations of maternal care, where providing healthy home-cooked meals multiple times a day for their families is linked to women's central roles as caregivers.

Theme 5: COVID-19, Hygiene Practices, and Food Security

The onset of the COVID-19 pandemic led to increased use of disinfectants, sanitizers, and other cleaning supplies, as well as other personal protective equipment (PPE) globally. Following recommendations from the World Health Organization (WHO), public health authorities in most countries, including Canada, urged residents to adopt various measures to minimize their risk of exposure to the novel coronavirus (Government of Canada, 2026; WHO, 2025). These strategies included wearing face masks, maintaining good personal hygiene by regularly washing hands with alcohol-based hand rubs or soap, and cleaning and disinfecting common household surfaces (Khan & Yadav, 2020). Residents needed to make additional PPE purchases to comply with these hygiene measures.

Several participants discussed their new intensive cleaning and sanitizing routines during the pandemic. For R.S., this cleaning exercise was a daily, time-consuming task that interfered with completing other household tasks, including food-related tasks like cooking.

When we brought home fruits and vegetables, I spent more than an hour just cleaning them before eating them. Before storing them, even before putting them in the kitchen pantry, I would spray everything with chlorine and wipe them down. This took time that we could have used to cook, study, or spend with family, but we spent it cleaning what we bought.

These augmented cleaning routines disproportionately increased women's domestic labour burden. Chores such as disinfecting newly purchased groceries, sanitizing surfaces, and managing PPE supplies added to and expanded existing

household responsibilities, such as cooking and childcare. It shows how pandemic risk management became gendered care work, thus reinforcing the pre-existing division of labour in the participants' households. Moreover, pandemic hygiene practices increased women's invisible labour within the home.

At the same time, these pandemic hygiene measures added new costs for our participants and their families, putting extra pressure on their household budgets. R.S.'s photograph depicts the strain of purchasing the necessary cleaning supplies and groceries (Image 7). She explained that prior to the pandemic, her family would buy larger quantities and a variety of foods along with a few cleaning products. The situation changed after the pandemic began, when they bought fewer groceries but more disinfectants, sanitizers, and masks. This shift affected their food consumption, especially leading to a decrease in the purchase of snack foods.

Before, we used to buy snacks for the kids, but now we buy less snacks and more cleaning supplies. The kids were affected by not getting unhealthy snacks. And we focused on essentials like cleaning supplies, masks, and sanitizers.



Image 7: Which should we spend money on? Food or cleaning materials?

Buying cleaning supplies became the top priority for participants, followed by essential groceries, especially vitamin-rich foods like vitamin C to strengthen the immune system. Many participants expressed frustration with the high costs of masks, sanitizers, and cleaning products, which had become necessary purchases. Although vital for health and safety, these items strained families already facing tight budgets. Money that could have gone toward food or other household essentials was instead diverted to the purchase of PPE. This shift in spending priorities worried many, as they had to cut back on groceries to afford masks, hand sanitizers, and disinfectants needed to protect themselves and their families from the coronavirus. A different participant shared how deeply PPE became part of their daily routines during the pandemic: "When guests came home, instead of offering them something to eat or drink, we'd give

them masks.” It shows how normal social interactions were significantly changed by COVID-19. Practices of sociality shifted from traditional hospitality towards guests to prioritising the physical safety, health, and well-being of guests and family members. Offering masks, once associated with hospitals and clinical settings, became a gesture of care and caution, reflecting the new normal (Images 8 and 9).



Images 8 and 9: Masks for family members and guests

Theme 6: COVID-19, Well-Being and Food Insecurity

The COVID-19 pandemic introduced a new health risk of contracting coronavirus infections (Sepucha et al., 2024). Although women were perceived to be at lower risk, the overlapping effects of other vulnerabilities and limitations severely impacted their lives and daily routines (Connor et al., 2020). Studies have shown that recent immigrants, especially female immigrants in Canada, fared worse in terms of the long-term health consequences of the pandemic (Vang & Ng, 2023). They were overexposed to the virus and pandemic shocks due to their employment conditions, multigenerational living arrangements, low socioeconomic standing, limited access to health services, and other institutional barriers (Arya et al., 2021).

Such was the case with M.A., one of the participants with a serious preexisting medical condition. She required kidney dialysis three times a week due to renal dysfunction and was dependent on her disability benefits. Even before the COVID-19 pandemic, M.A. faced significant challenges to her food security due to her strict dietary needs tied to her chronic renal disease. She was diligent about what she ate, carefully avoiding certain ingredients and ensuring that everything she consumed met her medical requirements, as shown in Images 10 and 11. However, there were times when she could not afford the specific foods her diet demanded. Reflecting on this, M.A. shared her concern about the high cost of healthy foods that she was expected to eat for her medical condition: “I don’t understand why it’s so expensive to eat healthy. It’s not like I choose this lifestyle, but it’s what I have to do for my health.”



Images 10 and 11: Does this have any ingredients that could harm my kidneys?

M.A. shared that most food banks did not offer the items she needed to meet her dietary requirements. This lack of choice and variety in the foods available at the food banks often left her in a difficult situation. The financial support she received was not enough to cover her specific nutritional

needs, forcing her to make tough decisions about her daily intake and to afford healthy food. These circumstances often caused her to consume less or remove essential items from her diet to make ends meet, despite receiving disability benefits. Images 12 and 13 capture this dilemma.



Images 12 and 13: To eat or to buy medications?

M.A. reported that her physical health worsened after receiving the COVID-19 vaccine. Due to unexpected side effects, she required additional medications to manage her preexisting medical condition. “Yeah, I had to. Because I was more tired, my medications got increased. I would have more breakage and issues. I wouldn’t have energy, and my meds increased. So did my fatigue,” she explained, pointing out how the vaccine worsened her condition. Her disability benefits, which were just enough to cover food and rent, now had to stretch further to pay for these new medications. She sometimes faced the tough choice between buying food and medication. Compounding her difficulties was the fact that some of her medications were sometimes unavailable at local pharmacies due to reduced imports and supply chain disruptions during the pandemic. Accessing health care was also difficult, especially during the lockdowns, when transportation services were limited and fewer buses operated. Even the GRT Mobility Plus service, which she depended on for transportation, was sometimes unavailable due to staffing shortages. This specialized service provides bus-style vehicles to transport people with impaired mobil-

ity in the Region of Waterloo and offers discounted fares for low-income residents through the Affordable Transit Program (ATP). The pandemic-related limitations on public services severely restricted M.A.’s mobility and made it hard for her to attend her regular hospital appointments for kidney dialysis or routine check-ups at medical clinics, further complicating her health management.

M.A.’s example illustrates that food insecurity can also involve weak access to medically appropriate food. Our analysis shows that the pandemic worsened pre-existing structural inequalities, especially for migrants with health conditions. For individuals such as M.A., living with chronic illness during the pandemic created constant uncertainty and stress, affecting overall well-being. The onerous combination of limited income and chronic illness increased competing survival priorities, forcing tough choices between nutrition and medical care, as conveyed through Images 12 and 13. Additionally, chronic illness and limited financial resources acted as what Meijering et al. (2024) characterize as “cascading layers of vulnerabilities,” by increasing M.A.’s risk of severe COVID-19 illness and hindering her ability to manage pandemic restrictions effectively.

Theme 7: Food as Care, Cultural Continuity and Resilience

With limited options for eating in restaurants and various food joints away from home due to public health restrictions, food skills became crucial to individual and household coping and resilience, especially during the early months of the pandemic (Phares et al., 2022). Our study participants also demonstrated resilience through everyday food practices, even as the pandemic exacerbated multiple challenges related to their food security and household responsibilities. Some participants identified positive aspects associated with these domestic activities amid the crisis. With families spending more time together at home due to lockdowns and restrictions, the pandemic offered a unique opportunity for bonding and togetherness that might not have been possible under regular circumstances. For many families, this extraordinary period was a chance to reconnect, particularly among parents and children who previously had busy schedules and spent much of their time outside the home. The enforced togetherness led to more shared meals and joint activities like cooking, strengthening family bonds. Food practices at home functioned as acts of care and emotional support, helping participants and their families cope with the stress and uncertainty of the pandemic. Food preparation and shared meals became social and emotional anchors during an unprecedented period of crisis.

A few participants used the extra time at home to develop new skills, particularly in the kitchen. With the increased focus on home life, they seized the opportunity to learn new recipes and experiment with traditional Syrian dishes and sweets. For a few participants, baking became a creative and rewarding outlet, allowing them to experiment with new techniques and introduce a variety of treats into their households. This period of learning not only helped pass the time but also enhanced their culinary abilities, which became a source of pride and happiness. Other participants and their

families took advantage of the slower pace of life to enjoy quality time with loved ones, pursue neglected hobbies, and cultivate a renewed appreciation for the simple pleasures of home life. For some participants, despite its difficulties, the pandemic brought unexpected moments of growth, learning, and renewed family connections.



Images 14 and 15: A new economic opportunity

Participants' centring on traditional Syrian recipes and sweets underscores the importance of food in maintaining a sense of cultural identity. Food served as a cultural bridge between past and present, helping participants and their families maintain a shared identity amid a global crisis. Cooking, baking and sharing meals not only strengthened family bonds but also provided other opportunities for cultural continuity, skills development, and even small-scale economic adaptation. One participant applied her newly acquired skills to earn extra money. B.N., a younger participant, used her free time to learn how to bake and prepare sweet treats.

Before the pandemic, she would buy ready-made sweets and bread. Later, she prepared a small batch of sweets and baked goods and sold them to friends and acquaintances, as depicted in Images 14 and 15. B.N.'s example shows how food-related knowledge and skills can be mobilized as a resource for economic independence, especially for migrant women with limited economic opportunities.

Conclusion

Despite being the beneficiaries of one of Canada's largest refugee resettlement programmes over the past decade, few studies have critically analysed how successfully Syrian newcomers have integrated into Canadian society, particularly regarding their food security. These research gaps are especially pronounced for those resettled in smaller Canadian cities where support systems may be limited, such as fewer specialized resettlement service agencies and weak social networks due to the absence of preexisting ethnic and sociocultural communities (Si et al., 2024). There is also a dearth of information on how Syrian newcomers fared during the extraordinary circumstances of the COVID-19 pandemic (Devereux, 2023). These knowledge gaps are consistent with limited research on the food security of resettled refugees in high-income countries. Our paper attempted to address these deficiencies by documenting the food security experiences of newcomer Syrian households in Kitchener-Waterloo and by drawing on findings from a new Photovoice study with 11 Syrian women. A broad perspective on food security was adopted to evaluate transformations in participants' and their households' food security since their displacement from Syria, including conditions after third-country resettlement in Canada. The paper considered overlooked aspects connected with food security, particularly cultural food security, and analysed the role of less-explored determinants such as gender, health, food memories, and food rituals. The impact of the COVID-19 pandemic on food activities, including cultural rituals and food security, was another important aspect of the analysis.

The study reaffirms the significance of cultural food security in the overall food security and well-being of resettled Syrians before, during, and after the pandemic. Forced migration from Syria, resettlement in the Waterloo Region and the COVID-19 pandemic all hindered participants' cultural food security and overall food security in various ways. The recent growth of Syrian and Arabic grocery stores in Kitchener-Waterloo is a significant local development that supports the cultural food security of newly resettled Syrian migrant and refugee communities. Despite being commercial enterprises with higher charges, these ethnic food stores helped newcomers reconnect with familiar ingredients and culinary practices, rebuild their disrupted food activities to some extent and renew cultural traditions after displacement. Our research underscores the need to build affordable, accessible cultural food resources for resettled migrant communities at the local scale in Canada.

Moreover, pandemic safety measures restructured household food security and food consumption choices. Participants lowered both the quantity and the quality of their

grocery buying to cope with COVID-era inflation. There was a further shift from buying snacks to prioritizing cleaning supplies, indicating how the pandemic transformed household consumption priorities. Health protection and safety products became essential commodities, replacing discretionary food purchases. The analysis highlighted how crisis conditions reorganized everyday economic decisions for resettled Syrian families and redefined what purchases could be considered “essential.”

The intersection of the COVID-19 crisis, chronic illness, and food insecurity constituted another key theme for analysis, by revealing how the pandemic layered new risks onto existing fragilities. Medically necessary dietary requirements rapidly amplified food insecurity among vulnerable migrants, especially those relying on fixed incomes, such as disability benefits. This finding emphasizes the need for special programmes targeting disadvantaged cohorts within marginal migrant and refugee groups, such as those with chronic medical conditions, during crisis periods.

Gendered duties of care remained unchanged for most participants after migration and resettlement. The COVID-19 crisis added new responsibilities, including maintaining the health and hygiene of their stay-at-home family members and preparing more meals for them. This extra care-work, including food-work, created “multiple burdens” for some participants. Overall, the experiences of our study participants reveal how the pandemic amplified existing gender inequalities within migrant families, by placing resettled Syrian women under heightened pressure to balance caregiving, domestic labour, and integration-related activities such as education and training. Pandemic conditions blurred the boundaries between education, childcare and domestic labour, including food-related duties, transforming the home into a space in which these multiple roles had to be performed effectively and simultaneously. At least one participant sought to address these challenges by simplifying their cooking routines. For others, fulfilling these many duties, including preparing fresh food from scratch several times daily, even amid rising hardships, reified their maternal responsibilities, rooted in sociocultural values of caregiving and motherhood. These gendered dimensions of intensified pandemic caregiving had indirect negative effects on participants and their households’ food security. The study underscores the need for greater recognition and support for women’s unpaid, under-recognized care work within the home to mitigate gender-based crisis-related shocks and hardships.

While the pandemic intensified many challenges for study participants related to food security, food sourcing, and household responsibilities, they also demonstrated resilience through their everyday food practices. These pandemic food-based activities became acts of care, helping families cope with the harsh circumstances of the COVID-19 crisis. The kitchen thus became a place of agency, creativity, skills development, and economic independence, even as it concentrated on activities such as cooking and baking, which are typically associated with women and reflect gendered expectations around food preparation.

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