

## Data Spotlight

Topic	Highlights	Source
<p><b>From Risk to Resilience: An Equity Approach to COVID-19</b></p>	<ul style="list-style-type: none"> <li>• “While the COVID-19 pandemic affects us all, the health impacts have been worse for seniors, essential workers, racialized populations, people living with disabilities and women. We need to improve the health, social and economic conditions for these populations to achieve health equity and to protect us all from the threat of COVID-19 and future pandemics.”</li> <li>• “COVID-19 Burden not equal across populations in Canada. Some individuals and age groups face disproportionately higher risks for infection and impacts that others in Canada”.</li> </ul> <p><b>COVID-19 BURDEN NOT EQUAL ACROSS POPULATIONS IN CANADA</b></p> <ul style="list-style-type: none"> <li>• <b>Long-term care home residents and workers:</b> “at the end of August, residents and staff of long-term care (LTC) facilities have been the most affected group, comprising about 15% of all cases and residents alone making up 80% of all COVID-19-related deaths associated with long term care.”</li> <li>• <b>Age-related trends :</b>“From early July to August 2020, the highest incidence of COVID-19 was reported among 20 to 39 year olds. This contrasts with the previous trend observed until mid-June, when people 80 years of age and older had the highest incidence”</li> <li>• <b>COVID-19 Affects the Sexes Differently:</b> “While much remains unknown, observed differences in COVID-19 impacts between the sexes seem to be associated with biological and situational factors. By the end of August 2020, 55% of all reported cases were female and 45% were male. Risk factors have been proposed to account for the observed differences. For instance, two out of three long-term care home residents are female. In addition, the majority of healthcare workers are female, thereby increasing their risk of COVID-19 infection due to viral exposure from residents, patients or colleagues. Among those hospitalized, 25% of males experienced severe symptoms requiring ICU admission compared to only 16% of females”.</li> </ul>	<p>The Chief Public Health Officer of Canada’s Report on the State of Public Health in Canada 2020. <a href="#">From Risk to Resilience, An Equity Approach to COVID-19</a></p> <p>Please visit this report for full findings and additional source information.</p>

Topic	Highlights	Source
	<ul style="list-style-type: none"> <li>• <b>Risks for Essential Workers</b> :“Essential workers experience higher risks of viral exposure in their work environment or while commuting to/from work than people confined in their homes. The burden is especially high among healthcare workers, who are estimated to account for 19% of all national cases of people with COVID-19 by mid-August.”</li> <li>• <b>Confined Working Conditions Fuel Transmission:</b> “Confined group working conditions among essential workers can fuel viral transmission, especially in situations where physical distancing between workers is difficult”.</li> <li>• <b>Group Living Conditions May Promote Viral Spread</b></li> <li>• <b>Marginalization Increases Risk:</b> “While national data are not available, <a href="#">evidence is beginning to emerge to suggest that racialized communities who have been marginalized through structural factors (such as racism) may experience higher rates of COVID-19 infection.</a>”</li> <li>• <b>Intersectionality and COVID-19:</b> There are overlapping and compounding risks related to sex, gender, racialization, income, housing, employment, and other socioeconomic factors.</li> </ul> <p><b>COVID-19 IS NOT IMPACTING CANADIANS EQUALLY</b></p> <ul style="list-style-type: none"> <li>• “The health and well-being of people in Canada varied before the pandemic. Differential access to material resources, privilege and power, and the resulting health inequities, influenced COVID-19 morbidity and mortality (illness and death). These factors also drove differences in the impact of public health measures necessary to address the pandemic.”</li> </ul> <p><b>DIFFERENTIAL EXPOSURE TO COVID-19</b></p> <p><b>Exposure at Work</b></p> <ul style="list-style-type: none"> <li>• <b>Working From Home</b> <ul style="list-style-type: none"> <li>○ <a href="#">“Working from home is strongly associated with educational attainment; two-thirds of primary earners with a bachelor’s degree or higher can work from home compared to less than one-third of those with a high school diploma. It is also connected to income, with both earners able</a></li> </ul> </li> </ul>	

Topic	Highlights	Source
	<p>to work from home in over 50% of two-income families in the top ten percent for earnings, while only 8% of two-income families in the lowest ten percent for earnings were able to have both people work at home.”</p> <ul style="list-style-type: none"> <li>○ “Generally, women are more likely to have jobs that can be done from home, partly because more men work in jobs such as agriculture or construction that cannot be done from home. However, women are well represented in the healthcare sector, making up more than 86% of registered nurses and 40% of physicians working in Canada. Healthcare workers are often employed for work which involves close or very close physical contact; in 2019, almost 90% reported these conditions of work compared with 50% of other employed Canadians.”</li> <li>○ Age may also influence the ability to work from home. Just over 20% of young workers – those under the age of 25 years – are estimated to have the ability to telework, compared to almost 45% of those aged 35 to 44, 42% of those aged 45 to 54 and 38% of those aged 55 to 64 years.</li> <li>○ “Research found that workers in low-income occupations are working in jobs that put them at greater risk; this is particularly true for women, immigrants, and racialized workers”.</li> <li>○ “.workers in precarious employment — jobs outside of the standard employment relationship, meaning not full-time, permanent, and accompanied by benefits — are less likely to have important employment and economic protections, particularly among those who are low-income. The absence of these protections is challenging at any time, but, during a pandemic, the consequences can be more severe and may increase risk of virus exposure and transmission”.</li> </ul> <p><b>Exposure at Home</b></p> <p><b>Group living</b></p> <ul style="list-style-type: none"> <li>● <b>Long-term care facilities (LTC)</b> <ul style="list-style-type: none"> <li>○ Older adults in LTC homes, as well as the healthcare workers who support them, have been seriously and devastatingly impacted.</li> </ul> </li> <li>● <b>Group homes</b> <ul style="list-style-type: none"> <li>○ “In addition to the group nature of their housing, people with disabilities may be at greater risk of contracting the virus. This is particularly true for people who need assistance with hand washing, who need support to be independent, who need support to understand or comply with physical distancing</li> </ul> </li> </ul>	

Topic	Highlights	Source
	<p>requirements, or who need to touch surfaces for support or information (such as in the case of blindness or impaired vision).”</p> <ul style="list-style-type: none"> <li>• <b>Shelters</b> <ul style="list-style-type: none"> <li>○ “People experiencing homelessness have high rates of chronic physical conditions, heightening the risk of suffering complications if they contract COVID-19”.</li> </ul> </li> <li>• <b>Migrant workers/temporary foreign workers</b> <ul style="list-style-type: none"> <li>○ “Provincial and municipal health officials have identified migrant farm workers as populations at risk of contracting the virus through community transmission”</li> </ul> </li> <li>• <b>Prisons</b> <ul style="list-style-type: none"> <li>○ “The implementation of public health measures to reduce the risk of COVID-19 being introduced into prisons, or to control outbreaks, such as limiting visitors, managing physical distancing and limiting movement within institutions, have had unintended impacts on the health and well-being of people in prison by further isolating them.”</li> </ul> </li> <li>• <b>Overcrowded Housing</b> <ul style="list-style-type: none"> <li>○ Some regional health networks have begun tracking COVID-19 positive test rates against census data to determine whether overcrowding is a possible factor in transmission so that targeted testing and public health responses can take place quickly.”</li> </ul> </li> <li>• <b>Ableism and COVID-19</b> <ul style="list-style-type: none"> <li>○ “COVID-19 has amplified some forms of systemic ableism. For example, blanket prohibitions of visitors at hospitals, group homes, and long-term care facilities may have adverse effects when a person with a disability requires assistance with vital services like communication, caregiving, or supported decision-making”.</li> </ul> </li> </ul>	

Topic	Highlights	Source
	<ul style="list-style-type: none"> <li>• <b>Exposure on transportation</b> <ul style="list-style-type: none"> <li>○ “Public transit may pose a risk because of the challenges of physical distancing in a confined space, the inability to easily screen passengers for illness, and the presence of many high-touch surfaces.”</li> </ul> </li> </ul> <p><b>DIFFERENTIAL SUSCEPTIBILITY</b></p> <ul style="list-style-type: none"> <li>• “Data collected to date have identified Canadians who are aged 60 and over as being at increased risk of more severe outcomes related to COVID-19 along with those who have compromised immune systems, and those with certain underlying medical conditions.”</li> </ul> <p><b>DIFFERENTIAL TREATMENT</b></p> <ul style="list-style-type: none"> <li>• While universal in principle, access to health care has been identified as a challenge for a number of groups in Canada that may face greater exposure and susceptibility to COVID-19, including populations experiencing homelessness, racialized and Indigenous populations, immigrant populations, migrant workers, temporary foreign workers, people with disabilities,224–226 and populations living with low-income.</li> <li>• “Accessing relevant, meaningful and culturally safe health care is a challenge for many groups who experience stigma and discrimination due to implicit and conscious biases, a lack of respect for and understanding of historic and social determinants that influence health and stigmatizing organizational cultures.”</li> </ul> <p><b>IMPACT OF PUBLIC HEALTH MEASURES IN RESPONSE TO COVID-19</b></p> <ul style="list-style-type: none"> <li>• <b>The Impact of Stigma, Discrimination, Violence:</b> Misinformation (including deliberate disinformation) drives and exacerbates stigma and discrimination in the context of infectious disease. This includes inaccurate and stigmatizing myths about the origin of disease as well as stigmatizing depictions of affected groups.”</li> </ul>	

Topic	Highlights	Source
	<ul style="list-style-type: none"> <li data-bbox="359 240 1682 386">• <b>Loss of Employment/Decreased Employment</b> :“Despite government wage support programs, in April, 5.5 million Canadian workers were affected by the shutdown, including 3 million Canadians who lost jobs and 2.5 million Canadians who had COVID-19 related absences from work. <a href="#">By August 15, 1.8 million Canadian workers were affected by the shutdown.</a>”</li> <li data-bbox="359 435 1625 542">• <b>Workers in low-wage jobs:</b> “Of the jobs lost in March and April, employees in lower-wage jobs (meaning lower than two-thirds of the 2019 annual median wage of \$24.04/hour) suffered the greatest losses (38%) compared to those in other jobs (13%)”.</li> <li data-bbox="359 591 1667 698">• <b>Women:</b> “Emerging evidence suggests that these types <a href="#">of job losses will disproportionately affect women with small children and families</a> since women are largely represented in the service and retail sectors and in the absence of childcare, they will be unable to return to the workforce.”</li> <li data-bbox="359 747 1696 932">• <b>Workers who are racialized, immigrant and/or Indigenous:</b> “In August, 2020, the employment rate for those born in Canada was closer to pre-pandemic levels compared to immigrants who have lived in Canada for more than five years. <a href="#">Employment among Indigenous populations living off-reserve (91.4% of the pre-pandemic employment level, in February) has not rebounded as quickly as for non-Indigenous Canadians (96.7% of February employment)</a>”.</li> <li data-bbox="359 980 1682 1247">• <b>Youth and post-secondary students:</b> “<a href="#">Youth (aged 15 to 24) have experienced significant and lasting impacts of the shutdown.</a> In August 2020, employment for young women and men was at 84.7% of February levels. Unemployment rates for young men (25.6%) and young women (20.2%) were higher in August 2020 than during the 2008/2009 recession (16.4% at its peak) also, “<a href="#">Unemployment was much higher among youth who identified as a member of a group designated as a visible minority (32.3%, not seasonally adjusted), compared to youth who did not identify as Indigenous or with a group designated as a visible minority (18.0%)</a>”</li> </ul>	

Topic	Highlights	Source
	<ul style="list-style-type: none"> <li>• <b>Employment and Health:</b> “Loss of income and employment is important for public health, as income and job loss both influence health and well-being”.</li> <li>• <b>Inclusion :</b> “Some people living with disabilities reported their employer would not supply accessible technology or devices to allow working from home to be possible, forcing these individuals to bear the burden of purchasing equipment themselves.”</li> </ul> <p><b>IMPACT ON SOCIAL COHESION AND SOCIAL CONNECTEDNESS</b></p> <ul style="list-style-type: none"> <li>• “The public health measures put in place to reduce the spread of the virus have caused sudden disruptions in the social fabric of Canadians’ lives”</li> </ul> <p><b>CUMULATIVE IMPACT OF COVID-19 AND PUBLIC HEALTH MEASURES ON MENTAL HEALTH</b></p> <ul style="list-style-type: none"> <li>• <b>Mental health and well-being:</b> “Canadians face many pressures, from job and/or income loss to social isolation, health anxiety, worry for loved ones and — for many families— the concurrent strain of financial and family responsibilities”.</li> <li>• <b>Mental illness:</b> “Canadians living with pre-existing mental illness may be more vulnerable during COVID-19”.</li> </ul> <p><b>FOOD INSECURITY AND REDUCED ACCESS TO HEALTHY FOODS</b></p> <ul style="list-style-type: none"> <li>• “Data suggest that income loss triggered by COVID-19 is increasing household food insecurity”</li> </ul> <p><b>SUBSTANCE USE</b></p> <ul style="list-style-type: none"> <li>• <b>Increased use of alcohol, tobacco, and cannabis:</b> “The majority of Canadians over the age of 15 years did not change their use of substances during the early days of the pandemic. However, some Canadians reported increasing their use of alcohol (14%), cannabis (6.5%) or tobacco (3.3%)”.</li> </ul>	

Topic	Highlights	Source
	<ul style="list-style-type: none"> <li>• <b>Worsening of the opioid crisis:</b> “Jurisdictions across the country have reported increases in overdose deaths and non-fatal harms related to opioids and other substances, in part due to increasing toxicity of the illegal drug supply since the start of the pandemic”.</li> </ul> <p><b>Safety and Family Violence</b></p> <ul style="list-style-type: none"> <li>• “The suggestion to shelter in place may have provided additional risks for those who experience family violence including intimate partner violence, child maltreatment and elder abuse.”</li> <li>• <b>Impacts on children and youth:</b> “The home environment changed during COVID-19 due to school and childcare closures, increased stress among caregivers and community members, limited access to services, prolonged physical distancing measures, and lost or reduced family income.” And “Many child welfare organizations have highlighted the significant decrease of child abuse or neglect reports, raising concerns that this may be the result of fewer detection opportunities, as children are likely to be isolated at home and without community involvement”</li> <li>• <b>Access to services and shelters:</b> “Statistics Canada completed a survey with a sample of victim services programs in late-June and early-July, 2020. In the study context, victim services include services offered by police and court programs, community-based services and sexual assault centres. Among participating programs, 54% reported an increase in the number of domestic violence victims they served from mid-March to the date of the survey, whereas 29% reported no change and 17% reported a decrease.”</li> </ul> <p><b>POTENTIAL LONG-TERM IMPACTS</b></p> <ul style="list-style-type: none"> <li>• <b>Long-term Economic Stability:</b> “Groups identified as being most economically vulnerable during a short period of joblessness include single mothers and their children (56%) and individuals living in families where the main income earner is under 35 years of age without a high school diploma (67%). Forty-five percent of older families where the main income earner is without a high school diploma are also at risk of financial vulnerability” also “There are also workers in Canada that are not accounted for in labour statistics nor eligible for income supports.”</li> </ul>	



Topic	Highlights	Source
	<ul style="list-style-type: none"> <li>• <b>Interrupted Educational Opportunities, Differential Access to Distance Learning:</b> “School closures may increase existing educational disparities between children from low- and high-income families”. Also, “The move to virtual learning may require greater parental involvement which can be challenging for lower-income parents who may have fewer opportunities to be involved in their children’s learning activities, due to multiple jobs and/or long working hours”.</li> <li>• <b>Health System Impacts :</b> “Data from the Canadian Institute for Health Information (CIHI) demonstrate a decline in surgical procedures. <a href="#">There is concern that people did not seek medical care, even when they needed it</a>”.</li> <li>• <b>Impact on Physical Activity:</b> <ul style="list-style-type: none"> <li>○ <a href="#">“Physical distancing requirements – including gym closures and cancelled sports leagues – may negatively affect physical activity behaviours and increase sedentary activities and screen-time.”</a></li> <li>○ <a href="#">“For children living in urban areas, who do not have access to safe accessible outdoor spaces where they can maintain physical distance, the impact of physical isolation measures may increase disparities in childhood obesity risk”.</a></li> <li>○ <a href="#">“Limited physical activity as a result of public health measures to physically isolate may also have an impact on mental health.</a> Research has demonstrated that people who were able to engage in physical activity outdoors were more likely to report excellent or very good mental health.”</li> </ul> </li> </ul>	