



Hamilton

# INFORMATION REPORT

<b>TO:</b>	Mayor and Members Board of Health
<b>COMMITTEE DATE:</b>	October 19, 2020
<b>SUBJECT/REPORT NO:</b>	Social Determinants of Health in COVID-19 (BOH20015) (City Wide)
<b>WARD(S) AFFECTED:</b>	City Wide
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<b>SIGNATURE:</b>	

## COUNCIL DIRECTION

Not Applicable.

## INFORMATION

### Purpose

This report (BOH20015) and the accompanying presentation provide the Board of Health (BOH) with an overview of the profile of the social determinants of health (SDOH) among Hamilton’s COVID-19 cases, and outlines actions staff are taking to address health inequities among vulnerable populations.

### Background

The SDOH are the conditions in which people are born, grow, work, live and age. The Ontario Human Rights Commission (OHRC) emphasizes that collecting and analyzing data that identifies individuals by their race, ethnicity, or similar factors can assist institutions to promote human rights and to improve equitable service delivery<sup>1</sup>.

<sup>1</sup> Ontario Human Rights Commission. (2009). Count Me In, Collecting Human Rights Based Data. Toronto, from: <http://www.ohrc.on.ca/en/count-me-collecting-humanrights-based-data>

OUR Vision: To be the best place to raise a child and age successfully.

OUR Mission: To provide high quality cost conscious public services that contribute to a healthy, safe and prosperous community, in a sustainable manner.

OUR Culture: Collective Ownership, Steadfast Integrity, Courageous Change, Sensational Service, Engaged Empowered Employees.

On May 26, 2020 Hamilton Public Health Services (PHS) began collecting SDOH data on COVID-19 cases using a tool adapted from Middlesex London, Toronto and Peel Health Units. On June 26, 2020 the Ministry of Health made changes to Regulation 568 under the Health Protection and Promotion Act to include the collection of data on race, income, household size, and language from individuals whom test positive for COVID-19.

Between March 1, 2020 and August 31, 2020 just under 1,000 residents in Hamilton were infected with COVID-19. PHS collected the required SDOH data, along with data on employment status and Indigenous status, from 630 of those individuals. The findings should be interpreted with caution due to the level of response achieved.

### **Findings**

Our data suggests that racialized populations, health care workers and people living with low-income are disproportionately affected by COVID-19 in Hamilton. We also found that males and seniors are more likely to be hospitalized and die from COVID-19.

These findings are not unique to Hamilton. Toronto Public Health also found that people in the lowest income group have the highest rate of COVID-19 and that there is a higher case and hospitalization rate for racialized communities<sup>2</sup>. Similar trends have been shown in Waterloo Region<sup>3</sup> and in the City of Ottawa<sup>4</sup>.

The COVID-19 pandemic is magnifying the impact of the SDOH and the inequities that have long existed in communities. For example, we know that people living with low incomes have difficulty affording basic resources (e.g. food, paying bills). During a pandemic, difficult choices between needed supplies (e.g. hand sanitizer, masks) and basic resources is exacerbated.

### **Actions Taken**

The Hamilton EOC, PHS and the health system partnership of the Hamilton COVID Response Table (HCRT) continue to work in close alignment to support vulnerable populations throughout the pandemic. Actions taken include:

- Collect and analyze data on social determinants;
- Support shelters to follow public health measures;
- Delivery of essential supplies (e.g. medicine to people without social supports);

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<sup>2</sup> Toronto Public Health. (2020). COVID-19 and the Social Determinants of Health: What do we know? Updated May 14th, 2020 from: [https://www.toronto.ca/wp-content/uploads/2020/05/96e0-SDOHandCOVID19\\_Summary\\_2020May14.pdf](https://www.toronto.ca/wp-content/uploads/2020/05/96e0-SDOHandCOVID19_Summary_2020May14.pdf)

<sup>3</sup> CBC Kitchener-Waterloo. (2020). New immigrants, low-income earners in Waterloo region seeing higher rates of COVID-19. Updated July 15th, 2020 from: <https://www.cbc.ca/news/canada/kitchener-waterloo/immigrants-low-income-waterloo-region-covid-19-1.5649453>

<sup>4</sup> Ottawa Matters. (2020). Early race-based COVID-19 data showing Ottawa minority groups affected at high rate. Updated June 24th, 2020 from: <https://www.ottawamatters.com/local-news/early-race-based-covid-19-data-showing-ottawa-minority-groups-affected-at-high-rate-2515515>

- Consultation and support to Indigenous organizations (e.g. COVID call centre);
- Enhanced infection control support in congregate settings (e.g. residential care facilities, temporary farm worker housing);
- COVID-19 testing for persons living in shelters;
- Mobile testing for isolated individuals unable to get to assessment centres; and,
- Help people to access mental health and addictions supports

### **Next Steps**

The EOC, PHS and the HCRT will continue to support vulnerable populations to achieve greater health equity throughout the COVID response, including:

Continue to...

- Work on previous Actions Taken;
- Work with Mental Health partners;
- Ensure social service providers who work with vulnerable populations know when and how to access testing;
- Support congregate settings as they undertake IPAC reviews.
- Advocate for basic income principles;
- Work to mitigate the unintended consequences of COVID-19 control measures (e.g. deferred immunizations, dental and vision health care, as well as adverse impacts on mental health and loss of income).

Advocate for...

- Public policy to protect seniors and low-wage frontline workers;
- Adequate human resources to support vulnerable populations.

Collaborate with...

- Communities disproportionately impacted by COVID-19, including racialized and low-income communities;
- Community service provider agencies serving populations impacted by COVID-19 or public health measures.

Exploration of...

- Voluntary isolation centres to minimize household transmission.

### **APPENDICES AND SCHEDULES ATTACHED**

Not Applicable.