

**April 24, 2020**

**To:**

Hon. Christine Elliott, Deputy Premier and Minister of Health  
Hon. Tod Smith, Minister of Children, Community and Social Services

**Cc:**

Dr. David Williams, Chief Medical Officer of Health (MOH)  
Helen Angus, Deputy Minister  
Clint Shingler, Director, Health System Emergency Management Branch

Letter: **Ontario Needs a COVID-19 Plan for People in All Group Living Settings**  
Pour la lettre en français, SVP appuyez [ici](#).

Dear Minister Elliott and Minister Smith,

Ontario's most recent COVID-19 modelling, released on April 20, suggests we have reached the pandemic peak. By all accounts this represents a provincial turning point. But **gains in slowing the spread of the virus are not equally felt or shared by all**. The terms "community spread" and "congregate settings" obscure important differences in how this virus is spreading inequitably, and limit our ability to target scarce community resources where they are most needed.

Provincial modelling shows the virus continuing to spread exponentially amongst elderly residents in long-term care (LTC). As a result, the province has belatedly embarked on a COVID-19 strategy for LTC. And while the term "congregate settings" has entered our lexicon, a fulsome response for other at-risk populations living in shared spaces – as well as highly mobile populations experiencing homelessness or using drugs – hasn't.

For people living on the margins of society – people living without housing, or in shelters; incarcerated and detained populations; people living with disabilities and in group homes; those staying in in-patient mental health facilities including residential addictions and withdrawal management; residential treatment programs for children and youth; frail seniors in assisted living; people from all populations living in supportive housing; women, children and gender diverse people experiencing homelessness or sheltering from domestic violence, (which is on the rise during this pandemic); people getting by in refugee shelters, seasonal migrant workers living in shared housing – there is no strategy to test, track, protect or prioritize, despite their similar conditions to LTC.

**Far from slowing down, cases appear to be rapidly increasing amongst these populations and the increased risk of an outbreak is very real.** As recently as April 20th, the Willowdale Shelter for refugees reported 74 confirmed cases. The Brampton Jail has closed its facility and transferred people detained there to the Toronto South Detention Centre. Across the province, shelters for people experiencing homelessness are reporting outbreaks.

**We can't be sure of the full province-wide impact, because the province does not report on the details of COVID-19 outside of hospitals the way other provinces, such as Alberta,**

**do.** For example, Ontario discloses how many tests have been completed, not how many people have been tested, which populations have been tested, or the settings in which new cases are appearing. **The lack of transparency obfuscates the true impact of this pandemic.** At the same time, the Chief Medical Officer of Health has not responded to calls to collect and use race-based and socio-demographic data; to prioritize personal protective equipment or on-site test kits for marginalized settings; or to consider wider preventive measures and screening for at-risk populations. Without provincial guidance, funding and leadership community organizations are unnecessarily operating in the dark to meet life-or-death needs.

Countries and regions that have successfully contained the pandemic have acted quickly to identify new cases early through widespread testing and targeting to key populations. They have also contained future outbreaks through contact tracing and providing support to people who test positive in isolating. Ontario must act now to expand access to COVID-19 testing for marginalized populations to prevent and contain outbreaks. **Without equitable interventions COVID-19's disproportionate impact on people living in congregate settings will continue to be felt.**

We urge the province to immediately address access-to-care gaps through the implementation of a provincial strategy for congregate and/or highly mobile settings. The province must act immediately to:

- 1.) Prioritize testing, including point-of-care test kits and testing of asymptomatic individuals, to facilitate COVID-19 containment and prevention amongst priority groups, including:
  - People experiencing homelessness
  - Highly mobile populations of people who use drugs
  - Populations in correctional and detention facilities
  - People living with disabilities and in group homes
  - Those staying in in-patient mental health facilities including residential addictions and withdrawal management and residential treatment programs for children and youth
  - Frail seniors in assisted living
  - People from all populations living in supportive housing
  - Women, children and gender diverse people experiencing homelessness or sheltering from domestic violence
  - People currently living in refugee shelters
  - Seasonal migrant workers living in shared housing facilities.
- 2.) Prioritize the distribution of personal protective equipment to each of the settings referenced above. and compensate organizations for pandemic-related costs
- 3.) Embed representatives from all these groups and sectors in formal COVID-19 planning tables including at the municipal, regional, and provincial levels.
- 4.) Report daily and publicly on the Ministry of Health's COVID-19 website the status of COVID-19 cases and fatalities in each of the settings referenced above, and provide updates on strategies and actions for these settings in daily Ministry Emergency Operations Centre calls.

- 5.) Extend Emergency Orders regarding staff working at a single facility, to all congregate living settings in the province. Ensure sufficient compensation for workers whose normal assignments will be disrupted. Ensure these workers can access adequate wages, benefits and working conditions to ensure this is possible for low-income workers.
- 6.) Put accountability mechanisms in place ensuring that COVID-19 prevention and containment mechanisms are appropriately implemented across facilities, including infection prevention and control.

**The burden of disease is not equal. “Community spread” is uneven,** and community-based organizations have been pleading for help and are operating in the dark without data, funds or plans to meet life-and-death needs. Current provincial responses take us further from containing this pandemic. We urge the province to act now to address this before we see the next wave of COVID-19 in these congregate settings.

**Endorsed by 138 organizations and 400 individuals.**

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| Addictions Mental Health Ontario                        | Centre Fancophone du Grand Toronto             |
| Advancing Change Together                               | Centretown Community Health Centre             |
| AdvantAge Ontario                                       | Chatham-Kent Community Health Centres          |
| Afro Canadian Caribbean Association                     | Chigamik Community Health Center               |
| AIDS ACTON NOW!   | Children's Aid Society of Toronto              |
| AIDS Committee of Windsor                               | Children's Mental Health Ontario               |
| Alliance for Healthier Communities                      | Chiu & Nathan Law                              |
| Alzheimer Society of Grey-Bruce                         | Choice In Health Clinic                        |
| Assisted Living Southwestern Ontario                    | Circle of Care                                 |
| Baawaating Family Health Team                           | City for All Women Initiative (CAWI)           |
| Belleville and Quinte West Community Health Centre      | CMHA Toronto                                   |
| Black Coalition for AIDS Prevention                     | Collaborative Aging                            |
| Black Creek Community Health Centre                     | Community Care Durham                          |
| Brock Community Health Centre                           | Community Health Centres of Northumberland     |
| Brock Mission   | Dale McMurchy Consulting                       |
| Cambridge Shelter Corporation                           | East End Community Health Center               |
| CAMH  | Eganville & District Seniors Needs Association |
| Canadian Centre for Accreditation                       | Elevate NWO                                    |
| Canadian Centre for Victims of Torture                  | Elizabeth Fry Toronto                          |
| Canadian HIV/AIDS Legal Network                         | Family Service Toronto                         |
| Canadian Lawyers for International Human Rights (CLAHR) | Fraser Advocacy                                |
| Canadian Mental Health Association, Ontario             | Gateway Community Health Centre                |
| Central Community Health Centre                         | Grand Bend Area Community Health Centre        |
| Centre de santé communautaire de Kapuskasing et région  | Guelph Independent Living                      |
| Centre de santé communautaire de Timmins                | Hamilton Centre for Civic Inclusion            |
|   | Hamilton Community Legal Clinic                |
|   | Health Providers Against Poverty (HPAP)        |

Health Zone Nurse Practitioner Led Clinic  
HIV & AIDS Legal Clinic Ontario (HALCO)  
ICAN - Independence Centre and Network  
Inclusive Aging  
Indus Community Services  
International Federation on Ageing  
Kemptville & District Home Support  
LAMP Community Health Centre  
Langs Community Health Centre  
Laridae  
Leading Youth for Empowerment (LYFE)  
London InterCommunity Health Centre  
Lumacare  
Manitoulin Legal Clinic  
March of Dimes Canada  
MEALS ON WHEELS NIAGARA FALLS  
ONT., INC.  
MICBA Forum Italia Community Services  
Millennial Womxn in Policy  
Mino M'shki-ki Indigenous Health Team  
MODC  
Mrkich Law  
Niagara Ina Grafton Gage Village  
Noojmowin Teg Health Centre  
North East Association for Community  
Living  
North Eastern Ontario Family and  
Children's Services  
North Lambton Community Health Centre  
North York Seniors Centre  
NorWest Community Health Centres  
OCASI-Ontario Council of Agencies  
Serving Immigrants  
OMPC  
Ontario Campaign 2000  
Ontario Community Support Association  
Ottawa Inner City Health Inc.  
PARC  
Parkdale Musicians Collective / PARC  
Parkdale Queen West Community Health  
Centre  
Partners In Health Canada  
Peel Cheshire Homes Brampton  
Peel Senior Link  
Peterborough 360 Nurse-Practitioner-Led  
Clinic  
Peterborough AIDS Resource Network  
Pinecrest Queensway Community Health  
Centre

Positive Change Toronto Initiative  
Positive Living Niagara  
Prism Analytics  
Quantum Transformation Technologies  
Quartz Promotion of Local Development  
Reena  
Regent Park Community Health Centre  
Rwandan Canadian Healing Centre  
Rwandan Community Abroad RCA-  
Toronto  
Seaway Valley Community Health Centre  
SHCHC  
Sisters4Hope  
Somerset West Community Health Centre  
South Riverdale Community Health  
Centre  
Stonegate Community Health Centre  
Street Health  
Sudbury Community Legal Clinic  
TAIBU Community Health Centre  
The GenWell Project  
The Neighbourhood Group Community  
Services  
The North Channel NPLC  
The Vaugahn Community Health Centre  
Thrive Group  
Traverse Independence  
United Jewish People's Order  
United Mennonite Home for the Aged  
Uzima Women Relief Group International  
Vaughan Community Health Center  
VHA Home HealthCare  
Vibrant Healthcare Alliance  
Vista Centre Brain Injury Services  
Wahl Elder Law  
WellFort Community Health Services  
Wesley Hamilton  
West Elgin Community Health Centre  
Western Ottawa Community Resource  
Centre  
Windsor Essex Community Health Centre  
WoodGreen Community Services  
Writi Inc.  
YES Shelter for Youth and Families  
YMCA Hamilton  
YMCA Peterborough Haliburton  
YWCA Canada  
YWCA Toronto