

Immunization coverage does not match racialized rates of positivity, hospitalization and death



- Our public education work to encourage positive vaccination decisions through town halls have continued weekly; albeit with smaller, more distinct audiences (especially particular faith communities, Black youth, Black educators, parents and caregivers of Black children) as well as social media messaging
- 2. Please remember that Black communities are starting from behind in vaccine uptake due to multiple causes and that progress has been steady; particular sensitivity is needed now to mitigate racialized outcomes from vaccine mandates

Inadequate sick days and

income support



- The Task Force recognizes 10 paid pandemic sick days as being pertinent to ongoing quarantine requirements and still needed to constrain the disparate impacts across Black communities
- Ahead of another pandemic, we reiterate the relevance of this amount of sick days for effective early intervention to stymy the expansion of infections
- We continue to support a universal basic income. In the interim, we call for changes within employment insurance (EI) to buffer the socio-economic stresses faced by Black and racialized workers who have been hit harder by job losses over the past 18 months

High levels of mistrust in health care and vaccine producers

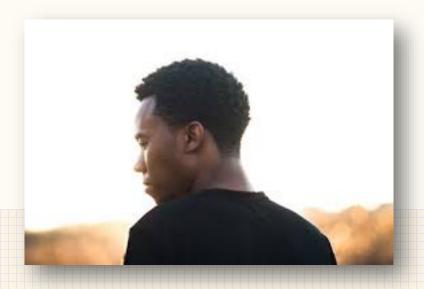


- The Task Force applauds Toronto Public Health's (TPH)effort to provide multiple entry points for accessing vaccines. TPH has done a remarkable job in reducing access gaps vis a vis vaccines.
- A strategic stigma reduction campaign to reduce the impact of racial stigma on health care settings and high rates of public mistrust is warranted given the public health consequences of disparate vaccine uptake;
- Also recommending stigma reduction efforts to reduce the growing public stigmatization towards the unvaccinated.

Surging

Mental health

concerns



- The number of deaths experienced by Black families is estimated to be 2-3 times that of their White peers. Compounding the health burden of the disparate losses has been the inability to conduct customary funeral practices that have served as protective rituals for healing and recovery (Green-Laughlin, 2020).
- As well, the murder of George Floyd had a huge vicarious impact on Black mental well being during the pandemic. Because each COVID death is estimated to leave behind 9 grieving family members (Simon et al, 2020), a post pandemic surge of mental health problems seems certain to occur. Indeed, a 15% increase in racialized gun violence across North America may be first indicator of post-pandemic surges.
- Scant evidence suggest that Black adult depression may be largely under-diagnosed whilst Black children and youth are over-diagnosed with attention deficit hyperactive disorders and conduct disorders. The scope of the problem is huge given research revealing Black individuals to be about 6 times more likely to have depressive symptoms than their peers (Calhoun, 2021; Cenat et al, 2021).

Surging

Mental health

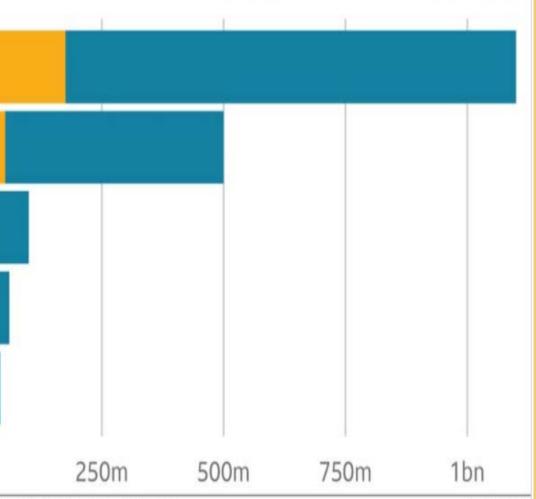
concerns

- We reiterate our request that the City of Toronto maintain its wrap around mental health supports for an extended post-pandemic recovery phase to reduce the scale of the post-pandemic mental health outcomes.
- We respectfully ask the city to support anti-Black racism capacity building and accountability efforts to ensure all mental health care is anti-racist within the GTA. One key reason Black residents have expressed high rates of vaccine hesitancy, and delayed help seeking, is their consistent experiences of racialized care; which is intrinsically unequal.
- The Task Force also recommends collaborative GTA mental health responses between hospitals, community mental health services and faith communities to improve community mental health literacy, reduce stigma and strengthen timely help seeking. Timeliness matters in this regard.

Global Inequity - Oct.21

any doses have been delivered so far?

ber of vaccine doses pledged and amount delivered



- The Task Force expresses deep disappointment that vaccine commitments by wealthy countries have not been kept; under 14% of promised vaccines to low-income countries have materialized and Canada provided less than 8% of its promised doses; pharmaceutical companies also provided far less vaccine supplies to the COVAX mechanism of the World Health Organization than was promised.
- The outcome of the vaccine global inequity is preventable deaths across every sector of society in the South; especially hard hit are Africa's unvaccinated health professionals. It is clear now that the charity approach to vaccine coverage for low-income countries and populations will not end the pandemic.
- Canada must do more than fulfill its current pledges. The Task Force recommends a declaration from the city that urges the government to support the proposal at the World Trade Organization (WTO) to temporarily waive certain TRIPS Agreement restrictions that are real barriers to scaling up the manufacture and supply of lifesaving COVID-19 vaccines.
- The Task Forces recommends that the City of Toronto support global vaccine equity efforts through the application, and public reporting, of a global health lens to the global, and Canadian, vaccine response,.

Availability of race-based data

- Mental health data indicates the possibility of stark racial divides between Black and White residents of Toronto in mental health burden.
 - A recent 2021 report (Cenat et al, 2021) found that Black Canadians have huge prevalence levels for severe depression; about 6 times the 12-month prevalence of the wider population. This suggests that the post-covid patterns could be dire.
- The Task Force continues to call upon the provincial government to institute race-based data collection across all health institutions and/or through OHIP utilizing community collaboration for data governance, interpretation, and disparity reduction planning; the Federal government is again urged to consistently collect and report on race based demographic data utilize the periodic national census and a race equity lens.
- Task Force recommends prioritization in the City of Toronto regarding collecting, analyzing and reporting regularly on race related data related to mental health as well as COVID-19 vaccination uptake. Such data collection is critical for providing immediate and culturally competent responses to magnified COVID-19 mental health effects.

Toronto Public Health Action Update



Immunization Coverage- Data Informed

- Advanced data-informed equity strategies to concentrate immunization efforts in postal codes with lower uptake and higher risk, including those with higher Black populations.
- Implemented and advocated for collection of socio-demographic data associated with vaccination.
- Worked with SDFA to support delivery of Black-focused vaccine clinics in partnership with the Black Physicians of Ontario and other community agencies. This included coordination and funding of cluster agencies, community ambassadors and assignment of TPH staff to Black-focused clinics.
- Protected and directed vaccine supply for hesitant communities where product type was an expressed contribution to vaccine hesitancy.

Toronto Public Health Update: Continued



Sick Days and Supports

- Collected, analyzed, and reported publicly on ethno-racial identity of COVID-19 cases.
- Supported the Taskforce's call for introduction of pandemic sick days, including through a
 public statement by Mayor Tory and Dr. de Villa on January 11, 2021.
- Administered the Toronto Voluntary Isolation Centre as part of the TO Supports Equity Action Plan.

Addressing Mistrust

- Developed and disseminated through networks, web and social media a series of infographics and key messages addressing vaccine concerns known to be prominent among Black residents.
- Supported numerous community webinars to target groups that included substantial Black populations with materials, expert speakers and logistical support.