Supplementary Report to City Council on the Use of Masks or Face Coverings in Enclosed Public Spaces

Date: June 30, 2020  
To: City Council  
From: Medical Officer of Health  
Wards: All

SUMMARY

The COVID-19 Pandemic was declared by the World Health Organization on March 11th, 2020. To date, Toronto Public Health has investigated over 14,000 cases of COVID-19 in the city. While cases are currently on the decline, and Toronto has entered Stage 2 of the re-opening process, the risk for the ongoing spread of COVID-19 continues. Some jurisdictions around the world, including many in the United States, are experiencing a resurgence of cases since re-opening.

Toronto Public Health continues to recommend public health measures to be practiced by all residents of the City in order to reduce the spread of COVID-19. These include cleaning hands often, staying home if sick, keeping a physical distance from others and wearing a mask or face covering, especially in settings where it is difficult to maintain a physical distance from others.

As Toronto continues to ease public health restrictions, in accordance with the Provincial Framework for re-opening, additional public health measures should be considered to prevent a resurgence of COVID-19 cases. Therefore this report recommends that City Council enact a temporary bylaw requiring the wearing of masks or face coverings in enclosed public settings as members of the public once again frequent businesses and other facilities.

While the science on the use of non-medical masks by the general public is not definitive, there is a growing body of evidence on the effectiveness of these masks to act as a barrier to prevent the spread of COVID-19. Further, jurisdictions that have mandated the use of non-medical masks in public settings have seen more people complying with the wearing of masks. The use of masks and face coverings is inexpensive, acceptable and a non-invasive measure to help control the spread of COVID-19. It has also been postulated that more widespread wearing of masks and face coverings may act as a visual cue that public health measures, including maintaining a physical distance from others, are still required, that the COVID-19
Pandemic is ongoing and that resurgence of local disease activity remains an ongoing threat. The Medical Officer of Health recommends that City Council enact a temporary bylaw requiring masks and face coverings in indoor public spaces by utilizing Council's authority to legislate for the protection of the health, safety and well-being of persons in Toronto as noted in the report (June 26, 2020) of the City Solicitor (Item 22.3a). This bylaw will require that businesses or facilities adopt a policy to ensure masks or face coverings are worn by the public in the enclosed public spaces under their control. The policy shall include corresponding signage and training for staff on the requirements of this bylaw.

RECOMMENDATIONS

The Medical Officer of Health recommends that:

1. City Council enact a temporary bylaw requiring the person or organization who owns or is responsible for the operation of a facility or business to have a policy to ensure masks or face coverings be worn by the public in the enclosed public spaces under their control, subject to appropriate exemptions for individuals who are unable to wear a mask or face covering for medical reasons, children under two years old, and other reasonable accommodations. The policy shall include corresponding signage and training for staff on the requirements of this bylaw.

2. City Council direct that the by-law provide that it shall come into force one week after being enacted, and expire at 12:01 a.m. on the first day after the completion of the first Council meeting after the summer recess (currently scheduled for September 30 and October 1, 2020), unless extended by Council.

3. City Council request that the Province enact a complementary mask regulation applicable within the City of Toronto, including on all public transit systems.

4. City Council recommend the Government of Canada enact a complementary mask regulation applicable to enclosed public spaces under federal jurisdiction within the City of Toronto.

5. City Council authorize the City Solicitor to introduce the necessary bill and apply for set fines to give effect to City Council's decision and City Council authorize the City Solicitor to make any necessary clarifications, refinements, minor modifications, or technical amendments as may be identified by the City Solicitor, in consultation with the Medical Officer of Health, in order to give best effect to the Medical Officer of Health's recommendations for the protection of the public as described in this report.

FINANCIAL IMPACT

There are no financial implications arising from the receipt of this report.
DECISION HISTORY

At its May 28, 2020 meeting, City Council requested the City Manager:

- in consultation with the Medical Officer of Health and the Chief Recovery and Rebuild Officer prepare a report outlining plans to protect the people of Toronto from a possible second wave of the COVID-19 Pandemic;

- in consultation with the City Solicitor, the Medical Officer of Health and other City Officials, to report on the ability of the City to require the wearing of masks or face coverings by the public within permitted businesses, offices and public gathering places to ensure that the re-opening of permitted businesses and activities is done in a manner which protects the health and safety of the public.


COMMENTS

As of June 27, there have been over 14,000 laboratory-confirmed cases of COVID-19 in Toronto, and tragically, over 1,000 deaths. While COVID-19 case counts are currently declining, there are still dozens of cases reported each day. COVID-19 is still circulating in the City, and the risk for its continued spread remains.

On May 28, City Council requested a report outlining the plan to protect the people of Toronto from a possible second wave of the COVID-19 Pandemic; this report is detailed here. Preventive measures that are currently adopted will need to continue to be expanded as required. One such measure includes increasing the use of non-medical masks or face coverings by the general public in public settings.

City Council also requested a report on the ability of the City to require the wearing of masks or face coverings by the public within permitted businesses, offices and public gathering places to ensure that the re-opening of permitted businesses and activities is done in a manner which best protects the health and safety of the public.

The re-opening of businesses and other services will result in more people circulating in public, returning to the workplace, gathering and taking public transit, which will make the ability to physically distance difficult, or in some cases, impossible. The benefits of reopening businesses and services must be balanced, to the extent possible, with measures to ensure the safety of employees and the public. The wearing of masks or face coverings by members of the public is one measure that can be taken to help mitigate these risks.

Currently the Medical Officer of Health, the Chief Medical Officer of Health for Ontario, Chief Public Health Officer for Canada and the World Health Organization strongly recommend the wearing of masks or face coverings where physical distancing cannot be maintained, in addition to other public health measures. However, even with a strong
recommendation by all levels of government, mask or face covering use is not at high enough levels to offer the best protection for all.

The science on masks continues to evolve

Masks can be important for containing COVID-19 since it is increasingly clear that infections may be transmitted by people with no symptoms of illness, or those who are pre-symptomatic [1]. Early in the Pandemic, asymptomatic transmission was not known to be significant. To prevent the spread from those who are contagious but without symptoms (or with very mild symptoms), masking needs to be universal and not restricted to individuals who think they may have COVID-19.

Medical masks are traditionally worn for two way protection: to protect the health care worker from being infected by a sick patient, and as source control to keep a health care worker's germs from spreading to a patient. Non-medical masks have not been shown to be effective in protecting the person wearing the mask, but can be beneficial for source control [2,3]. Source control prevents the spread of respiratory droplets from coughing, sneezing or talking from the person wearing the mask to others. There is evidence that cloth masks can reduce the expulsion of respiratory droplets into the air and onto surfaces [3].

In modelling studies, evidence is showing that higher compliance in the wearing of masks is required to achieve a significant positive impact. One study estimated that 50% compliance on the use of masks in public settings is not sufficient to prevent continued spread of COVID-19. However, at 80% public compliance, COVID-19 spread can be reduced [4]. Another model suggested that broad adoption of even relatively ineffective face masks may meaningfully reduce community transmission of COVID-19 and decrease peak hospitalizations and deaths [5].

An ecological study found societal norms and government policies supporting the wearing of masks by the public are independently associated with less mortality from COVID-19 [6]. Another ecological study from Germany showed that regions where masks were made mandatory earlier in the Pandemic had lower new infections subsequent to the introduction of the masking policy compared to those that adopted policies later on in the outbreak. The greatest drop in new cases was seen in those aged 60 years and older [7].

Spread of COVID-19 indoors versus outdoors

The risk for spreading COVID-19 appears to be higher in indoor settings compared to outdoors. Living in the same household with someone who has COVID-19 is clearly a high risk for spread. Indoor settings may also be more important for spreading COVID-19 since they are often more crowded compared to outdoor settings, the respiratory droplets from a person who is talking, coughing or sneezing can contaminate surfaces and may not fall as quickly to the ground when in the air due to less air ventilation, and the flow of air in an indoor setting may contribute to the spread of the virus in a particular direction [8]. In outdoor settings, there is often less crowding, good air circulation, and surfaces are less likely to be contaminated.
Given that all indoor settings are higher risk, requiring wearing a mask in indoor public spaces, including commercial and non-commercial settings, will be essential to prevent additional spread of COVID-19. Temporary removal of masks may be necessary for the purpose of receiving a service at a business or facility, but should be minimized where possible.

Global masking policies to slow the spread of COVID-19

Currently, there are over 100 countries which have adopted some form of legislation for universal masking. Many countries or regions that have contained COVID-19 outbreaks have higher rates of public mask usage. Some countries had "masking cultures" before the Pandemic, where people would wear masks in public to prevent the spread of infections routinely. Other countries issued government orders for public masking in response to the Pandemic.

Face masks are used extensively by the general public in Asian countries, for example China, Singapore, South Korea and Japan. Face-mask use has been increasingly common since the 2003 SARS epidemic. In Hong Kong, 76% of the population was wearing a face mask during the SARS epidemic [9]. Mask use in these countries and the higher practice of respiratory etiquette and hand hygiene may be associated with the lower COVID-19 rates observed in some of these countries.

Widespread mask use in transit systems

Many jurisdictions have enacted mandatory legislation for mask use on transit systems, recognizing that using transit can often not be avoided, and maintaining a physical distance on transit systems is difficult [10]. Beginning July 2, 2020, masks or face coverings are mandatory when travelling on the TTC, with some exceptions. Other transit systems in Ontario, including Ottawa, Brampton and Mississauga, have also enacted legislation requiring mask use. However, not all transit systems that serve in the City have a bylaw. GO transit and UP Express for example are under provincial jurisdiction. It would be preferable that the Province enact a complementary mask regulation applicable within the City of Toronto including on all public transit systems under provincial jurisdiction including the GO transit and UP Express.

Acceptability of masking

The effectiveness of universal masking may be dependent on the type of masks used, societal acceptance of masking, and other interventions applied. Masking techniques and norms need to be taught with targeted information to different demographics.

Leger and the Association for Canadian Studies publishes a Weekly COVID-19 Pandemic tracker. In their June 23rd survey, the online poll surveyed 1,521 adult Canadians. More than half of Canadian respondents (54%) said that masks should be mandatory in public and confined spaces, like shopping malls and public transit, with the highest respondents in Ontario (58%) [11]. In the June 9th survey, eighty per cent of respondents felt it is each Canadian’s individual responsibility to try to prevent a second wave of the Pandemic [12].
Masking as a visual cue for preventive behaviours

Where more routinely used, masks may serve as a visual cue for adopting this preventative measure, and act as a reminder to the public to perform other preventative behaviours. One study from Italy showed that mask use increases compliance with physical distancing, likely as a visual cue to maintain preventive behaviours [13]. Ensuring that preventive measures are top of mind is important, as fatigue of restrictions or the false perception that the risk for transmission of COVID is low can be concerning.

Universal masking for source control

Masking for source control can be a personal hygiene measure, and needs to be part of a broader strategy to reduce transmission risk. Cloth masks are low-cost, reusable and non-invasive. It is critical to emphasize that wearing a mask alone will not prevent the spread of COVID-19. Practising physical distancing and frequent hand washing are still the most effective methods to limit the spread of the virus. Contributing factors to the effectiveness of the use of cloth masks include proper training on mask use, proper fit, hand hygiene and duration of wear.

Toronto Public Health has already strongly recommended the use of masks and has taken into consideration the following in offering our advice to different settings and in our recommendations to the public:

- Masks protect others, not necessarily the wearer.
- Masks are not to be shared.
- Breathability, comfort, and safety (does not obstruct vision) are key to compliance.
- Some people may not be able to wear a mask due to health conditions (e.g. asthma, respiratory conditions, inability to tolerate) and should be exempted.
- In communities not accustomed to masking, there may be social or cultural implications that may affect compliance.
- Masks may give a false sense of security and reduce compliance with long-term usage.
- Barriers and engineering controls should be considered when prolonged face-to-face or close contact with others are unavoidable, and not rely on the use of a mask alone.
- The wearer should be properly educated on how to use a mask and adhere to all other mask etiquette. The mask should cover the nose, mouth and chin.
- The general public should wear non-medical (cloth) masks or face coverings and reserve medical masks for workers and health care settings.
- Health equity includes access to face masks and coverings.

Furthermore, the following issues as highlighted in the City Solicitor's report, were also assessed from a public health perspective when considering mandatory masking legislation as recommended in this report:

- Resources for enforcement were considered. Given constraints on resources of enforcement, our advice is to focus firstly on education, and that this requirement of a temporary by-law is necessary to change and increase adoption of mask use by the public.
- Appropriate education and communication campaigns to provide guidance on the purpose of the mask requirement and its proper usage.

Use of Masks or Face Coverings in Enclosed Public Spaces
• As discussed in this report, justification for the requirement to wear masks in addition to the current public health measures that are required, such as physical distancing and enhanced cleaning.
• There are costs and challenges associated with requiring masks for businesses, facilities and the public. Consultation on the implementation of the bylaw with businesses, facilities and the public should be considered.
• The legislation should be time-limited beginning with a 90 day period and can be reviewed again at the September City Council meeting. Considerations at that time whether to extend the bylaw could include the state of the COVID-19 Pandemic at the local and global level, the updated scientific evidence, the availability of effective treatments or a vaccine, the easing of other public health restrictions as the province reopens and its impact on the operation of businesses and facilities, and the possible introduction of COVID-19 in the City from international travel.
• Balancing the public health necessity for masks given the current situation for COVID-19 as compared with the right of individuals under the Charter of Rights and Freedoms.

As noted in the City Solicitor's report, the most efficient way to enact mandatory masking legislation would likely be through a provincial order through the [Emergency Management and Civil Protection Act](#) as has been done with other measures related to the re-opening process. However, since this has not yet been enacted, a temporary City bylaw at the recommendation of the Medical Officer of Health is appropriate at this time to proceed with requiring masks or face coverings in indoor public spaces in the City of Toronto.

**Workplaces / Occupational Health and Safety**

Non-medical masks or face coverings are not considered personal protective equipment (PPE) and may not be suitable for occupational health and safety. Employers should consult with Occupational Health and Safety guidelines to ensure that measures that are appropriate to their particular work setting -- which may or may not include mask-wearing policies -- are properly implemented.

**CONCLUSION**

Requiring masks or face coverings in enclosed public spaces will be an added public health measure to further protect the public and aid to controlling the spread of COVID-19 in Toronto. Masks and face coverings are inexpensive, acceptable and a non-invasive measure to help control the spread of COVID-19. Despite much coverage in the popular media, the science on masks is not definitive and it continues to evolve. However, evidence is accumulating on this subject and the trend is towards promoting their widespread use in areas where COVID-19 continues to circulate, as an added preventive measure in combination with physical distancing, frequent hand hygiene and staying home when sick. As restrictions continue to be eased, resulting in more people in enclosed settings where it is difficult to maintain a physical distance, wearing a mask will act as a physical barrier to the spread of respiratory germs. Requiring masks will increase their use, and may act as a visual cue to the public that COVID-19 continues to spread and that everyone must do their part. The Medical Officer of Health recommends that City Council enact a temporary bylaw requiring masks and face coverings in indoor spaces.
public spaces by utilizing Council’s authority to legislate for the protection of the health, safety and well-being of persons in Toronto as noted in the report (June 26, 2020) of the City Solicitor (Item 22.3a). This bylaw will require that businesses or facilities adopt a policy to ensure masks or face coverings are worn by the public in the enclosed public spaces under their control. The policy shall include corresponding signage and training for staff on the requirements of this bylaw.

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SIGNATURE

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ATTACHMENTS

References


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