

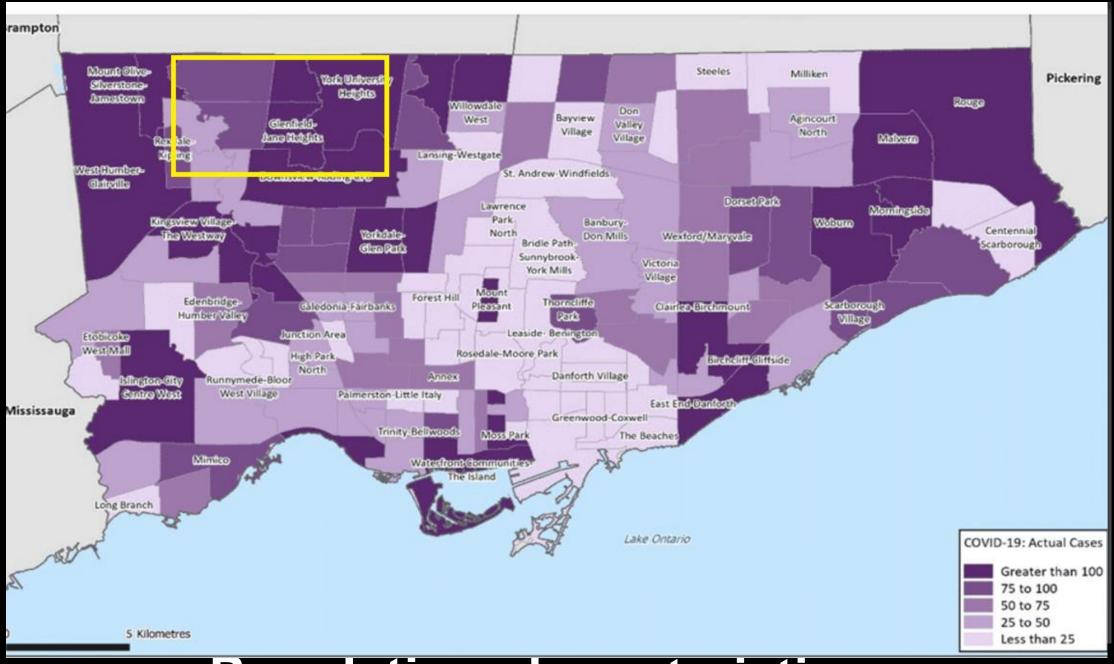
High Priority Community Strategy: A community-led response to COVID-19 in Northwest Toronto (NWT)

Building More Equitable Communities:
Moving Ontario's HPCS From the Margins to the Mainstream
Toronto Metropolitan University
May 31st, 2023

Cheryl Prescod Executive Director Black Creek Community Health Centre

COVID-19 Pandemic: Early Warning signs in NWT

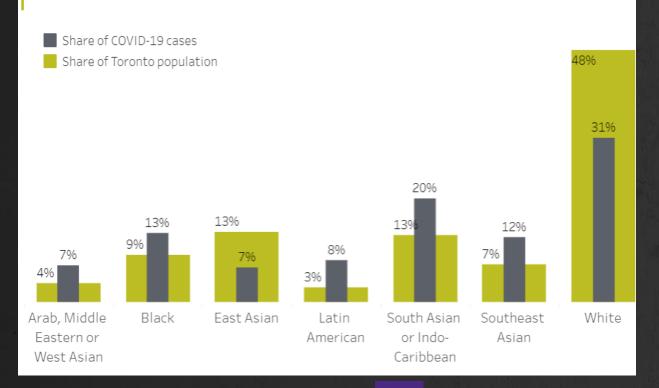




Population characteristics

Based on risk-factors for virus transmission, no surprise COVID-19 disproportionately impacted NWT area: high number of low income, Black and racialized populations. High material deprivation levels = High COVID-19 rates.

Share of COVID-19 cases among ethno-racial groups compared to the share of people living in Toronto, with valid data up to December 31, 2021 (N=139,965)



Toronto's COVID-19 divide: The city's northwest corner has been 'failed by the system'

We take a deep dive into the neighbourhoods hardest hit by the coronavirus — where community advocates say officials should have acted faster on evidence suggesting they would be vulnerable.

By Jennifer Yang Investigative Reporter
Kate Allen Climate Change Reporter
Rachel Mendleson Staff Reporter
Andrew Bailey Data Analyst

A Sun., June 28, 2020 | Ø15 min. read

3011., June 28, 2020 (3.7 min. read

@ Article was updated Dec. 22, 2021





COVID-19 Pandemic Response in NWT



Community Engagement and Ambassador Program



Access to Vaccines and Testing

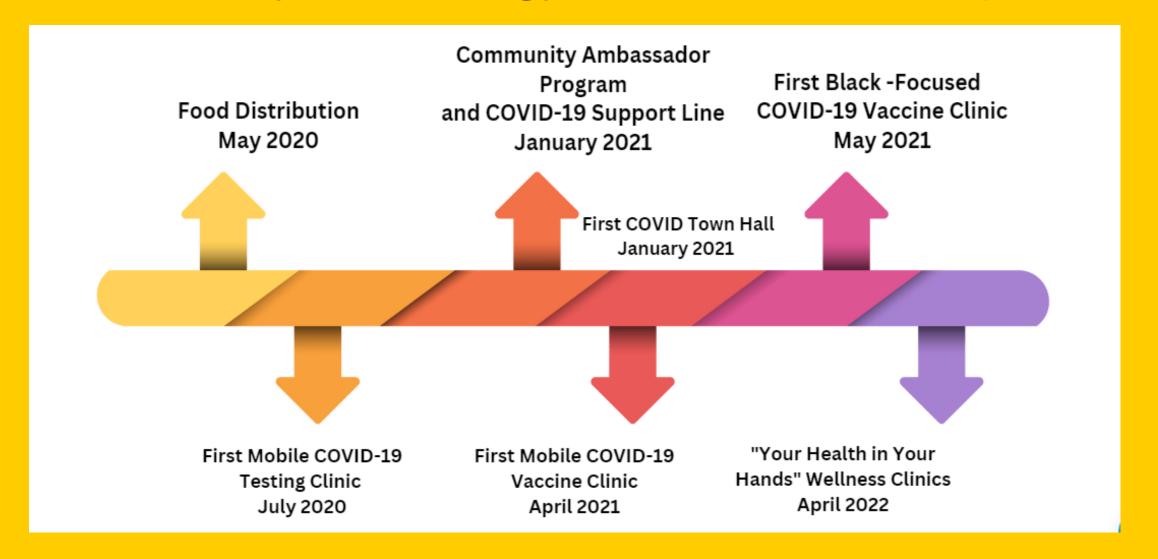


Wrap-around Supports and Preventative Screening



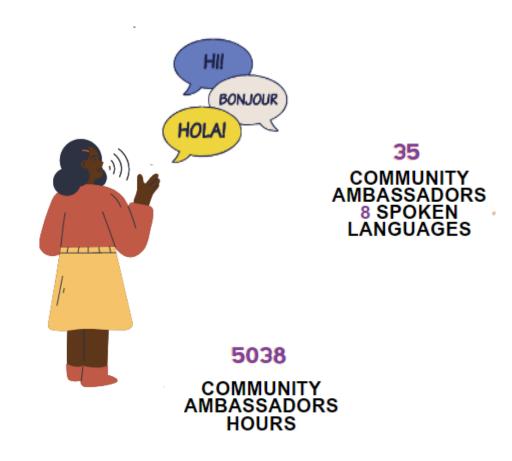
Applying an Equity Lens to a hyper-local COVID-19 Response Strategy

Community-led Strategy built to Address Inequities



Strong Community Engagement

- Community Ambassadors as Trust-builders
- Existing social and relational networks utilized to engage with community members and reduce stigma associated with COVID-19 Vaccines and Testing
- Trends identified in community to support planning and implementation of local clinic activities, outreach and engagement



Community-led Testing & Vaccine Clinics

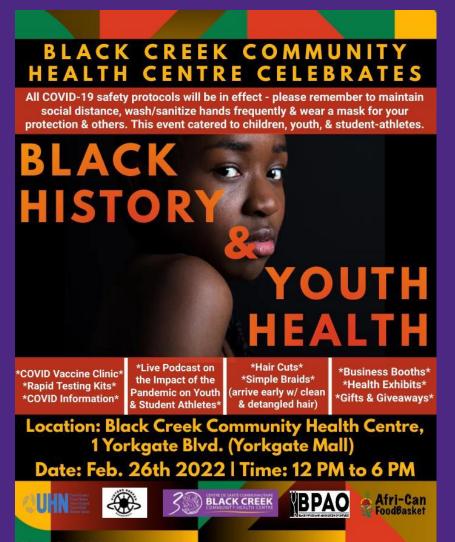


>700 mobile & pop-up community clinics working with >35 partners





Black focused clinics & community health fairs



29%
Community
members
identify as
Black

> 100 Community health fairs & townhall sessions



Wrap-around supports



17357
CALLS AND
MESSAGES TO
COVID-19 SUPPORT
LINE

> 8 000
PCR TESTS AND
REFERRALS TO
TESTING

> 150 000 PPE AND RATS DISTRIBUTED

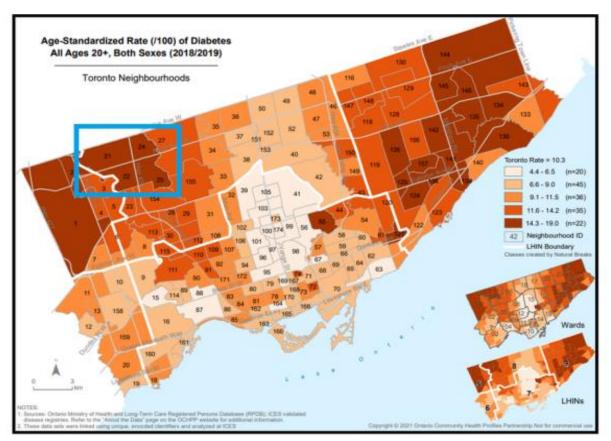


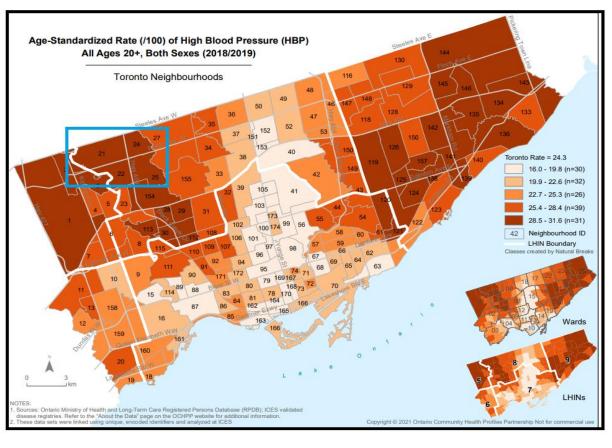
>100 000 VACCINATIONS

33 436
HOT MEALS,
GROCERIES
AND FOOD
VOUCHERS
DISTRIBUTED



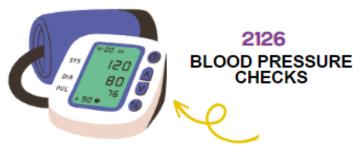
Preventative Health Screenings





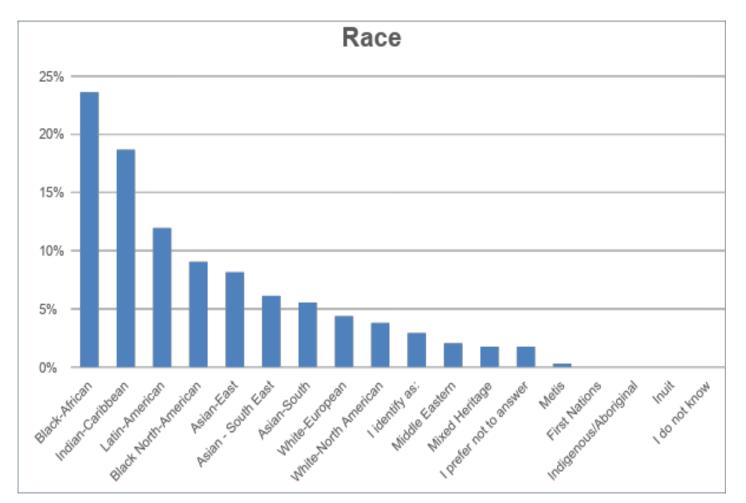


Your Health In Your Hands Wellness Clinics > 60 Health workshops & training sessions held

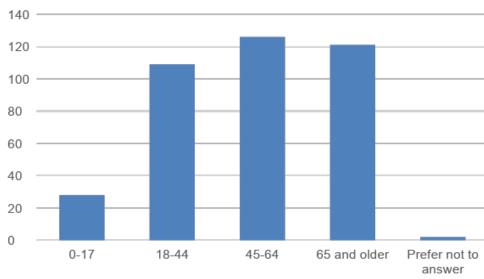


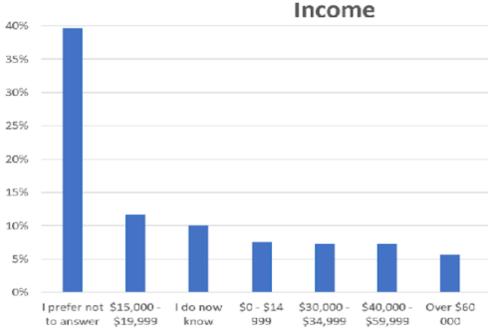
Measuring access through data collection





Age











Important to understand health care access barriers during public health emergencies and how to provide adequate resources for vulnerable populations (especially in under-resourced neighbourhoods – achieved though OH's HPCS)

2

Populations have good knowledge of COVID-19 infection risks and safety measures (masks, hand washing) BUT their living conditions hindered their ability to isolate – Referrals to isolation hotels were useful

3

Many deterred from going to hospitals due to long wait times (no paid sick time) and fear of contracting infection – community clinics and care options utilized

4

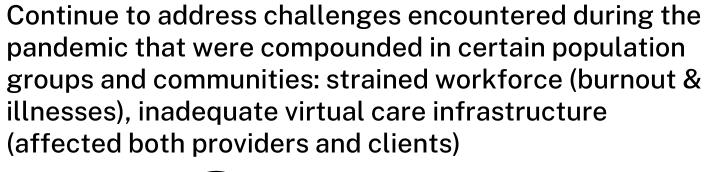
Mental health worsened during pandemic for those with increased psychological vulnerability – based on interrelationships between MH & discrimination, prior trauma, poor housing, lower employment options, fewer social networks

5

Barriers to chronic disease management – due to poor health literacy, lack of trust in healthcare providers, improper medication usage

How can lessons learned inform health service delivery in NWT?





2

Prioritize communities dealing with low income, racialized and uninsured individuals whose poor health outcomes resulted in higher COVID-19 infection and mortality rates

3

Resource HSPs in under-resourced areas that were stretched thin but rose to challenge (used to working with lean resources but resulted in increased staff burnout)



4

Incentivize community healthcare agencies that displayed innovation through community engagement and partnerships to address health inequities

5

Embed Community Health Ambassadors in care model as key enables of health service delivery in underserved communities. They can spearhead efforts to prevent, screen, and manage Chronic Diseases through "high touch care", improving adherence to care plans and public health measures

Thanks to our Community Health Ambassadors & Partners in Care "nothing for us without us"

Asante Soccer Club Latin American COVID Taskforce

BPAO LOFT

CAFCAN Lumacare

Brothers & Sisters Keepers Parrot Nest

Caribbean Island Food San Romanoway Revitalization Association

City of Toronto SCAGO

CMHA Toronto Shoreham Community Activities

Community Health Ambassadors St. Stephen's Church of Downsview

Emery Keelesdale NPLC Tobermory Community Activities

Epiphany Foods Toronto Catholic District School Board

Greenwin Property Management Toronto Community Housing

Humber River FHT Toronto District School Board

Humber River Hospital Toronto Parks Forestry & Recreation

Imdadul Mosque Toronto Public Health

Jamaican Canadian Association UHN

Jane Finch Centre Unison Community services

Thank You

cheryl.prescod@bcchc.com



