

Summary of Key Findings on COVID-19 in Immigrants, Refugees and Other Recent OHIP Registrants in Toronto

Data as of November 1, 2020. Trends over time as of November 7, 2020.

Key findings from ICES Report on COVID-19 in Immigrants, Refugees and Other Recent OHIP Registrants (Guttmann A, Gandhi S, Wanigaratne S, Lu H, Ferreira-Legere LE. Toronto, ON: ICES; 2020.)

Analyses include the following populations:

Immigrants and refugees

Definition:

1. Those who obtained permanent residency between January 1, 1985 and May 31, 2017 (based on the Immigration, Refugees and Citizenship Canada (IRCC) Permanent Resident File currently available at ICES).

Immigrants and refugees who arrived in Ontario before 1985 are defined as "long-term residents".

2. Second generation immigrant children under the age of 19 who were born in Ontario to mothers who gained permanent residence between 1985 and May 31, 2017.

Recent OHIP Registrants

Definition: Anyone who moved to Ontario since 2017 and obtained OHIP coverage. This includes immigrants, refugees and temporary workers who qualified for OHIP, as well as people born in Canada or another country who moved to Ontario from other provinces.

Analyses exclude the following populations:

1. Those who arrived in Ontario and are not eligible for OHIP (e.g. refugee claimants).

2. Those who are not registered for OHIP.

3. Those living in Long-Term Care facilities.

Immigrants and refugees face unique challenges which may put them at higher risk for COVID-19. Some factors that may contribute to increased COVID-19 risk include being an essential worker, working in health care and Long-Term Care specifically, living in housing or using public transportation where distancing is difficult, low income, social and economic disadvantage, barriers to health care and social services, and stress caused by racism and other discrimination. The City of Toronto and Toronto Public Health (TPH) are working actively with neighbourhoods, communities and service providers to reduce these inequities through its COVID-19 response.

TPH has collected information on ethno-racial identity and income from people with COVID-19 since May 2020. These data have consistently shown that people from racialized communities and with lower income levels have higher rates of COVID-19 cases and hospitalizations. Researchers at ICES analyzed data on COVID-19 for immigrants, refugees, and people who recently registered for OHIP benefits in Ontario. Key findings from this report are summarized below. Definitions of the populations in the analysis are noted in the text box on the left.

Key Findings:

Immigrants, refugees and other recent OHIP registrants had higher case rates, a higher percentage of positive COVID-19 tests and lower rates of COVID-testing than Canadian-born and long-term residents.

See pages 1-4 of ICES Report on COVID-19 in Immigrants, Refugees and Other Recent OHIP Registrants in Toronto for more detailed information by immigration category

- Immigrants, refugees and other recent OHIP registrants as defined by ICES in this analysis made up 42% of Toronto's population, but accounted for 54% of COVID cases as of November 1, 2020.
- The rate of COVID-19 was 923 cases per 100,000 in immigrants, refugees and other recent OHIP registrants in Toronto, compared to 565 cases per 100,000 in Canadian-born and long-term residents.
 - For Ontario as a whole, the rate was 772 cases per 100,000 in immigrants, refugees and other recent OHIP registrants, compared to 320 cases per 100,000 in Canadian-born and long-term residents.
- A smaller percentage of immigrants (13.5%), refugees (14.5%) and recent OHIP registrants (15.0%) were tested for COVID-19 in comparison to Canadian-born and long-term residents (20.5%)

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- The percentage of positive tests was higher in immigrants (6.1%), refugees (9.6%) and recent OHIP registrants to Toronto (5.9%), when compared to Canadian-born and long-term residents (2.8%).
 - Percent positivity increased substantially in refugees from August 1st to November 7th, particularly in October and early November. From October 4th to November 7th, percent positivity increased from 6.3% to 12.1% in refugees, compared to 2.3% to 4.0% in Canadian-born or long-term residents.
 - Percent positivity in the second wave has also been substantially higher for recent OHIP registrants and those in the sponsored family immigration category, when compared to Canadian-born or long-term residents.

Disparities in testing rates, percent positivity and case rates between immigrants, refugees and recent OHIP registrants to Toronto, compared to Canadian-born and long-term residents, were seen across all age groups, in both males and females.

See page 5-7 of ICES Report for more detailed information

- For example, children aged 0-19 who were first- or second-generation immigrants or refugees had substantially lower testing rates (9.7%) and a substantially higher percentage of positive tests (5.3%) when compared to Canadian-born children (17.4% tested and 1.8% positivity). First-generation refugee children had particularly high percent positivity, at 10.6%.

Test positivity and case rates were particularly high in immigrants and refugees from specific world regions, including East and West Africa, the Caribbean and Central America.

See pages 10-14 of ICES Report for more detailed information

- The highest percent positivity and case rates by world region were in immigrants and refugees from East Africa (12.8% and 2082 cases per 100,000), Western Africa (11.0% and 1817 cases per 100,000), the Caribbean (9.6% and 1598 cases per 100,000) and Central America (9.4% and 1623 cases per 100,000).
 - There were very high percent positivity and case rates by country in immigrants and refugees from Somalia (20.2% and 3018 cases per 100,000), and Iraq (16.1% and 2417 cases per 100,000).

Social factors and living conditions, including lower income, more crowded housing, lower education, and not speaking English or French were associated with lower testing rates and higher percent positivity.

See pages 8-9 of ICES Report for more detailed information

For recent immigrants and refugees aged 25+

- A total of 11.2% of recent immigrant and refugee adults (aged 25+ and landed in the past 10 years, since January 1, 2010) who spoke neither of Canada's official languages at landing were tested for COVID-19, and percent positivity was 9.5%. In comparison, 17.8% of recent immigrant and refugee adults who spoke one of Canada's official languages were tested for COVID-19, and percent positivity was 7.2%.
- A total of 13.9% of recent immigrant and refugee adults (aged 25+ and landed since January 1, 2010) with Secondary or less education at landing were tested for COVID-19, compared to 17.5% of those with a Bachelor's Degree or above. Percent positivity was 10.2% in recent

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immigrant and refugee adults with Secondary or less education, compared to 5.9% in those with a Bachelor's Degree or above.

- Living in a low income neighbourhood was associated with higher percent positivity across both immigrant/refugee and Canadian-born/long-term resident groups. This association was stronger for immigrants and refugees, with 8.7% positivity in lowest income group (people living in neighbourhoods with the lowest household income) when compared with Canadian-born and long-term residents, with 4.5% positivity in lowest income group.
- Similarly, living in a neighbourhood with high household densities was associated with higher percent positivity across both immigrant/refugee and Canadian-born/long-term resident populations. This association was stronger among immigrants and refugees, with 8.9% positivity in the quintile with the highest household density (people living in neighbourhoods with the highest household density), when compared to Canadian-born and long-term residents, with 4.6% positivity in the quintile with the highest household density.

A large number of immigrants and refugees with reported COVID-19 cases were female health care workers. The majority of reported COVID-19 cases among all health care workers and Long-Term Care Home staff were in immigrants and refugees.

See pages 16-18 of ICES Report for more detailed information

- A total of 60.6% of reported COVID-19 cases among health care workers (aged 19+) were in immigrants and refugees. A total of 69.9% of cases among Long-Term Care Home staff were in immigrants and refugees.
- Almost half (45.2%) of immigrant and refugee health care workers with reported COVID-19 cases worked in Long-Term Care Homes.
- One quarter (25.7%) of immigrant and refugee women with reported COVID-19 cases were health care workers, compared to 12.7% of Canadian-born and long-term resident women who had COVID-19.
- Almost half (48.5%) of immigrant and refugee women from Jamaica with reported COVID-19 cases were health care workers, and 58.6% of those health care workers were Long-Term Care Home staff.
- A total of 37.5% of immigrant and refugee women from the Philippines with reported COVID-19 cases were health care workers, and 42.2% of those health care workers were Long-Term Care Home staff.

About Health Care Workers:

- Health care workers working as nurse aides, orderlies and patient service associates provide basic care for patients in hospitals, Long-Term Care and other health care facilities. These workers have been at higher risk of getting COVID-19, especially those working in Long-Term Care Homes.
- In 2016, 79% of nurse aides, orderlies and patient service associates in the greater Toronto area were immigrants, and over 80% of these workers were immigrant women.
- Specific racialized groups, particularly Black and Filipino workers are more likely to work as nurse aides, orderlies and patient service associates, especially if they are immigrants. In 2016, 30% of immigrants working in these jobs in Canada were Black and 30% were Filipino.

Source: Turcotte M and Savage K. The contribution of immigrants and population groups designated as visible minorities to nurse aide, orderly and patient service associate occupations. Statistics Canada: 2020.

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