

Inégalités, quartiers, pandémie : réflexions et perspectives /
Inequality, neighbourhoods, and the pandemic: taking stock and looking
forward

Un symposium organisé par le Partenariat de recherche sur les quartiers en
transformation (PRQT) et le partenariat Immigration et résilience en milieu
urbain (IRMU)

Symposium organized by the Neighbourhood Change Research Partnership
(NCRP) and the Building Migrant Resilience in Cities partnership (BMRC),

Bibliographie facultative et sélective des travaux
pertinents /
Select bibliography of relevant works

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Introduction

Après deux ans de pandémie durant lesquelles les sciences sociales se sont vues interpellées de différentes manières, il est apparu judicieux d'organiser un symposium pour faire le point sur les orientations et besoins de recherche sur les villes et leurs quartiers au regard des enjeux soulevés par la crise sanitaire. Il était sponsorisé par deux subventions de partenariat CRSH : le Partenariat de recherche sur les quartiers en transition, et Immigration et résilience en milieu urbain. Ayant réuni des chercheurs, des stagiaires étudiants, et des intervenants du milieu le 4 février 2022, cet événement a permis de partager certains travaux entrepris depuis le début de la pandémie, d'en revisiter d'autres au regard des nouveaux enjeux, et de tracer des pistes de recherche et d'intervention à développer dans un contexte de sortie de crise. La présente bibliographie (dont une première version a été distribuée aux participants avant le symposium) s'inscrit dans cet effort de partage d'expertises entre chercheurs et avec les milieux de pratique.

Le thème des inégalités socio-spatiales a servi de fil conducteur tout au long de la journée. La pandémie les aura en effet exacerbées en renforçant le gradient social de la santé, les populations les plus défavorisées, souvent concentrées dans des secteurs où les logements sont exigus et les espaces verts sont insuffisants, ayant connu des taux de prévalence de la maladie et de mortalité plus élevés que le reste de la population. Cette inégalité face à la maladie n'est toutefois pas seulement une question de santé, mais recouvre des dimensions socio-spatiales dont les racines étaient déjà profondément ancrées dans le tissu social des villes avant la pandémie. Une réflexion prospective, même si préliminaire, sur les besoins et pistes de recherche urbaine suscités par cette crise, se doit également de dépasser le seuil des zones de défavorisation pour englober d'autres terrains et sites où la pandémie risque de laisser une trace durable. La présente bibliographie reprend des travaux qui contribuent à cette réflexion prospective. Elle s'organise autour de 5 thèmes substantiels et d'une question de méthode :

- Inégalités socio-spatiales et déterminants sociaux de la santé
- Travail essentiel, travail pauvre
- Conditions de logement, vie domestique, vie quotidienne
- Réponses au niveau des quartiers
- Infrastructures de proximité
- Enjeux de construction des données

After two years of the pandemic, during which the social sciences have been challenged in various ways, it seemed appropriate to organize a symposium to take stock of the orientations and needs of research on cities and their neighbourhoods considering the issues raised by the health crisis. It was sponsored by two research partnerships funded by the SSHRC: the Neighbourhood Change Research Partnership, and Building Migrant Resilience in Cities. This event, which brought together researchers, student interns and community-based stakeholders on February 4, 2022, provided an opportunity to share some of the work undertaken since the beginning of the pandemic, to revisit other work in light of the new issues, and to identify avenues of research and intervention to be developed as the crisis recedes. This bibliography (a draft version of which was circulated to the presenters before the symposium) is part of this effort to share expertise among researchers and with practitioners.

The theme of socio-spatial inequalities was the common thread of this all-day event. The pandemic has exacerbated these inequalities by steepening the social gradient of health, in that higher rates of sickness and mortality have been experienced by disadvantaged population groups, notably those living in neighbourhoods with crowded housing conditions and insufficient green space. Yet inequality in the context of the pandemic is not only a question of health, but also involves socio-spatial dimensions with deep roots in the urban social fabric that predate the pandemic. A forward-looking reflection, albeit preliminary, on how the pandemic may be shifting urban research priorities and orientations, should also go beyond a focus on disadvantaged zones to include other terrains and sites where the pandemic is likely to leave a permanent trace. This bibliography includes works that contribute to this prospective reflection. It is organized around five substantive themes and a methodological question:

- Socio-spatial inequalities and social determinants of health
- Essential workers, working poor
- Housing conditions, domestic and everyday life
- Neighbourhood level responses
- Neighborhood infrastructures
- Data construction issues

Notes méthodologiques / *Methodological notes*

Sans aucune prétention d'exhaustivité, cette bibliographie se veut un document préliminaire ramassant les travaux scientifiques et autres contributions que nous avons jugées les plus pertinentes et stimulantes en lien avec la thématique du symposium /

This is a preliminary and far from exhaustive bibliography of scholarly publications and other contributions that we consider to be relevant and stimulating in regards to the theme of the symposium.

Principales méthodes de cueillette /

Main methods used to compile the bibliography :

- Google Scholar et Google, à plusieurs reprises depuis le printemps 2021 : Mots-clés : /
Google Scholar and Google, several searches since spring 2021 using these key words :

Covid AND ...

...inequality[ies] / inégalité[s]

...deprivation

...housing / logement

...neighbo[u]rhood / quartier

...essential work / travail essentiel

...gender

...immigration

...refugees / réfugiés

Recherches ciblées pour des reportages médiatiques portant sur des impacts de Covid à l'échelle des quartiers des villes canadiennes / *Targeted searches for media reports on neighbourhood-scale impacts of Covid in Canadian cities*

- IRCC Bulletin – *Research at a Glance / Recherche en un coup d'oeil*

- Boules de neige à partir des bibliographies d'articles et rapports déjà retrouvés /
Snowballs from bibliographies of previously-retrieved articles and reports

Résumés et mots-clés /

Abstracts and keywords:

NB : Dans les cas où il n'y avait pas de résumé officiel, nous avons sélectionné de petits extraits du sommaire exécutif, de l'introduction ou de la conclusion. Dans les cas où les mots-clés n'étaient pas fournis, nous avons proposé des mots-clés. /

Where no abstract was supplied, we selected short extracts from the executive summary, the introduction or the conclusion of the document. Where no key words were supplied, we added our own.

Inégalités socio-spatiales et déterminants sociaux de la santé / Socio-spatial inequalities and social determinants of health

Adrien, Alix, Marie-Pierre Markon, and Vicky Springmann. 2020. *Inégaux face à la pandémie : Populations racisées et la covid-19 (Version détaillée)*. Montréal: Direction régionale de santé publique de Montréal. <https://santemontreal.qc.ca/fileadmin/fichiers/Campagnes/coronavirus/situation-montreal/point-sante/populations-racisees/Populations-Racisees-Covid-19.pdf> .

- **Résumé**

Ce court rapport fait partie d'une série d'analyses dont les objectifs sont présentés à l'introduction du document: "La pandémie de la COVID-19 ne touche pas tous les groupes sociaux pareillement. Elle peut accroître des discriminations déjà présentes dans les communautés. Des études menées ailleurs, notamment à Toronto, révèlent que certains groupes sont surreprésentés parmi les cas de COVID-19, plus particulièrement les personnes provenant de milieux défavorisés, ainsi que les communautés racisées et les groupes issus de la diversité ethnoculturelle. Au Québec toutefois, il n'est pas possible, à ce jour, d'établir la prévalence exacte de la COVID-19 selon le groupe ethnoculturel, puisque ces informations ne sont pas colligées lors des enquêtes de cas individuelles. Cependant, des analyses de type écologique telles que celles présentées ici permettent de jeter un premier éclairage sur la distribution des cas de COVID-19 selon l'appartenance à des groupes racisés ou issus de minorités visibles à Montréal. Des données de sondage permettent aussi d'explorer certains effets socioéconomiques de la pandémie chez ces groupes. Cette série d'analyses vise à poser les premiers jalons d'une réponse de santé publique adaptée et ciblée à Montréal."

- **Mots clés :** COVID-19, pandémie, inégalités, santé, minorité ethnique, Montréal.

Berkowitz, Rachel L., Xing Gao, Eli K. Michaels, and Mahasin S. Mujahid. 2020. "Structurally vulnerable neighbourhood environments and racial/ethnic COVID-19 inequities." *Cities & Health*:1-4. doi: 10.1080/23748834.2020.1792069.

- **Abstract**

Preliminary evidence indicates that the experience of the novel coronavirus is not shared equally across geographic areas. Findings in the United States suggest that the burden of COVID-19 morbidity and mortality may be hardest felt in disadvantaged and racially segregated places. Deprived neighborhoods are disproportionately populated by people of colour, the same populations that are becoming sicker and dying more often from COVID-19. This commentary examines how structurally vulnerable neighborhoods contribute to racial/ethnic inequities in SARS-COV-2 exposure and COVID-19 morbidity and mortality and considers opportunities to intervene through place-based initiatives and the implementation of a Health in All Policies strategy.

- **Keywords:** Neighbourhoods; racial/ ethnic health inequities; COVID-19

Blundell, Richard, Monica Costa Dias, Robert Joyce, and Xiaowei Xu. 2020. "COVID-19 and Inequalities." *Fiscal Studies* 41 (2):291-319. doi: <https://doi.org/10.1111/1475-5890.12232>.

- **Abstract**

This paper brings together evidence from various data sources and the most recent studies to describe what we know so far about the impacts of the COVID-19 crisis on inequalities across several key domains of life, including employment and ability to earn, family life and health. We show how these new fissures interact with existing inequalities along various key dimensions, including socio-economic status, education, age, gender, ethnicity and geography. We find that the deep underlying inequalities and policy challenges that we already had are crucial in understanding the complex impacts of the pandemic itself and our response to it, and that the crisis does in itself have the potential to exacerbate some of these pre-existing inequalities fairly directly. Moreover, it seems likely that the current crisis will leave legacies that will impact inequalities in the long term. These possibilities are not all disequalising, but many are.

- **Keywords:** COVID-19, inequality, health disparities, pandemic, racial/ ethnic health inequities.

Chen, Jarvis T., and Nancy Krieger. 2021. "Revealing the Unequal Burden of COVID-19 by Income, Race/Ethnicity, and Household Crowding: US County Versus Zip Code Analyses." *Journal of Public Health Management and Practice* 27:S43-S56. doi: 10.1097/phh.0000000000001263.

- **Abstract**

Objective: To overcome the absence of national, state, and local public health data on the unequal economic and social burden of COVID-19 in the United States.

Design: We analyze US county COVID-19 deaths and confirmed COVID-19 cases and positive COVID-19 tests in Illinois and New York City zip codes by area percent poverty, percent crowding, percent population of color, and the Index of Concentration at the Extremes.

Setting: US counties and zip codes in Illinois and New York City, as of May 5, 2020.

Main Outcome Measures: Rates, rate differences, and rate ratios of COVID-19 mortality, confirmed cases, and positive tests by category of county and zip code–level area-based socioeconomic measures.

Results: As of May 5, 2020, the COVID-19 death rate per 100 000 person-years equaled the following: 143.2 (95% confidence interval [CI]: 140.9, 145.5) vs 83.3 (95% CI: 78.3, 88.4) in high versus low poverty counties ($\geq 20\%$ vs $< 5\%$ of persons below poverty); 124.4 (95% CI: 122.7, 126.0) versus 48.2 (95% CI: 47.2, 49.2) in counties in the top versus bottom quintile for household crowding; and 127.7 (95% CI: 126.0, 129.4) versus 25.9 (95% CI: 25.1, 26.6) for counties in the top versus bottom quintile for the percentage of persons who are people of color. Socioeconomic gradients in Illinois confirmed cases and New York City positive tests by zip code–level area-based socioeconomic measures were also observed.

Conclusions: Stark social inequities exist in the United States for COVID-19 outcomes. We recommend that public health departments use these straightforward cost-effective methods to report on social inequities in COVID-19 outcomes to provide an evidence base for policy and resource allocation.

- **Keywords:** COVID-19, health disparities, public health surveillance, socioeconomic inequities, state health departments

Cleveland, Janet, Jill Hanley, Annie Jaimes, and Tamar Wolofsky. 2020. *Impacts de la crise de la COVID-19 sur les « communautés culturelles » montréalaises. Enquête sur les*

facteurs socioculturels et structurels affectant les groupes vulnérables. Montréal: Institut universitaire SHERPA. https://sherpa-recherche.com/wp-content/uploads/impact_covid19_communautes_culturelles.pdf.

- **Résumé**

Alors que de nombreuses études se penchent sur les dimensions médicales de la pandémie de la COVID-19, nous disposons encore de peu de données concernant les facteurs de risque sur les plans socioculturels, économiques et structurels qui peuvent affecter le niveau d'exposition des personnes et des groupes au virus, ainsi que leur capacité à appliquer les mesures de santé publique et à traverser la crise sanitaire. Or, les observations sur le terrain et les hauts taux d'infection dans les quartiers pluriethniques, financièrement défavorisés et racisés de Montréal suggèrent que certains facteurs socioculturels, économiques et structurels joueraient un rôle important. Le présent rapport est issu d'une étude exploratoire visant à mieux comprendre les enjeux rencontrés par les personnes issues de minorités ethnoculturelles et marginalisées durant la première phase de l'épidémie de COVID-19 à Montréal. Cette étude, réalisée dans l'urgence, n'a pas visé à dresser un portrait exhaustif de l'expérience des groupes minoritaires, mais plutôt à rapporter les perceptions et préoccupations d'un large éventail d'acteurs clefs impliqués auprès de ces populations. Nous avons choisi de mettre l'accent sur les communautés les plus défavorisées et celles avec un taux élevé de personnes à statut migratoire précaire. Ce rapport vise à améliorer notre compréhension des enjeux socioculturels et systémiques qui affectent la mise en place de mesures de santé publique en temps de crise sanitaire, afin de soutenir les autorités publiques dans la considération de ces enjeux lors des prochaines vagues ou de futurs événements similaires. Au printemps 2020 (soit entre le 13 avril et le 20 mai), nous avons mené des entrevues avec 50 informateurs clefs impliqués auprès de personnes issues de groupes ethnoculturels ou de l'immigration récente : des intervenants de groupes communautaires spécialisés dans l'accueil de nouveaux arrivants; des représentants d'associations ethnoculturelles; des leaders de groupes religieux; des membres de groupes d'entraide informels dans des quartiers pluriethniques; et des professionnels impliqués auprès de ces populations. Dans l'ensemble, les membres de communautés culturelles rapportent des préoccupations, besoins et difficultés très semblables à ceux vécus par la population majoritaire. Dans ce rapport, nous nous attardons principalement à mettre en lumière les éléments qui touchent spécifiquement les membres de communautés culturelles potentiellement plus vulnérables.

- **Mots clés** : COVID-19, quartier pluriethnique, minorité ethnique, communauté défavorisée, santé publique, statut de migration, Montréal.

Etowa, Josephine, and Ilene Hyman. 2021. "Unpacking the health and social consequences of COVID-19 through a race, migration and gender lens." *Canadian Journal of Public Health* 112 (1):8-11. doi: 10.17269/s41997-020-00456-6.

- **Abstract**

The ongoing COVID-19 pandemic has emerged as an unprecedented challenge for healthcare systems across the world. To date, there has been little application of a race,

migration, and gender lens to explore the long-term health and social consequences of COVID-19 in African, Caribbean and Black (ACB) communities in Canada, who have been disproportionately impacted by this pandemic. The evidence presented in this commentary suggests that recovery strategies need to adopt an intersectional lens considering race, migration and gender since ACB women and ACB immigrant women have been among the populations most impacted both personally and economically. To do so, there is an urgent need to incorporate variables capturing race, beyond “visible minority” status; gender, beyond looking at differences between women and men; and factors to help understand the complexities of migration trajectories (i.e., beyond the dichotomy of born in Canada versus not born in Canada categories) in Canadian datasets. We provide examples of policy and practice initiatives that will be urgently required to address the needs of these population groups as these race-based data become available.

- **Keywords:** COVID-19, health and social inequities, race, African, Caribbean, Black populations, gender, migration, health outcomes, policy, health practice.

- **Résumé**

La pandémie de COVID-19 en cours se révèle être un défi sans précédent pour les systèmes de santé du monde entier. Jusqu’à maintenant, on a très peu appliqué le prisme de la race, de la migration et du genre pour explorer les conséquences socio-sanitaires à long terme de la COVID-19 dans les communautés africaines, caribéennes et noires (ACN) du Canada, qui ont été démesurément touchées par cette pandémie. Selon les données probantes présentées dans notre commentaire, les stratégies de rétablissement doivent adopter un prisme intersectionnel qui tient compte de la race, de la migration et du genre, car les femmes ACN et les immigrantes ACN sont parmi les populations les plus touchées, personnellement et économiquement. Pour cela, il faut de toute urgence intégrer dans les jeux de données canadiens des variables qui saisissent la race, au-delà du statut de « minorité visible »; le genre, au-delà des différences entre femmes et hommes; et les facteurs qui aident à comprendre les trajectoires de migration dans toute leur complexité (c.-à-d. au-delà de la dichotomie des catégories « né au Canada » et « né à l’étranger »). Nous donnons des exemples d’initiatives stratégiques et pratiques qui seront nécessaires à très court terme pour répondre aux besoins de ces segments démographiques à mesure que les données fondées sur la race deviendront disponibles.

- **Mots clés :** COVID-19, iniquités socio-sanitaires, race, populations africaines, caribéennes, noires, genre, migration, résultats, sanitaires, politique (principe), pratiques en santé.

Guttman, Astrid, Sima Gandhi, Susita Wanigaratne, Hong Lu, Laura E. Ferreira-Legere, Paul J, Gozdyra P, Campbell T, Chung H, Fung K, Chen B, Kwong JC, Rosella L, Shah BR, Saunders N, Paterson JM, Bronskill SE, Azimae M, Vermeulen MJ, and Schull MJ. 2020. *COVID-19 in Immigrants, Refugees and Other Newcomers in Ontario: Characteristics of Those Tested and Those Confirmed Positive, as of June 13, 2020.* Toronto: ICES (formerly the Institute for Clinical Evaluative Sciences). www.ices.on.ca.

- **Abstract**

COVID-19 infections have taken a disproportionate toll on immigrants and some racialized populations in several countries, including Canada. The pandemic has sharpened the focus on structural and societal inequalities that have long existed; these

inequities put many racialized and immigrant populations at higher risk of both contracting the infection and suffering poor outcomes. In Ontario, COVID-19 has disproportionately affected those living in lower-income areas with high proportions of both immigrants and racialized populations. The City of Toronto recently released data showing a disproportionate number of COVID-19-positive residents among those who self-identify as Black, South Asian, Latin American, South East Asian and Arab/Middle Eastern/West Asian. In the last decade, Canada welcomed on average 275,000 immigrants per year as permanent residents, with Ontario receiving almost half. Immigrants who are permanent residents and citizens and those with temporary work permits are critical to Canada's economy and fill many skilled, semi-skilled and unskilled labour market needs.

This report focuses on patterns of testing and test results for immigrants and refugees from the initial phases of COVID-19 testing through to June 13, 2020. We included all Ontario residents eligible for the Ontario Health Insurance Plan (OHIP) apart from those living in long-term care homes where the dynamics of testing and infection are distinct from those living in the community and should be considered separately. We achieved this undertaking through a longstanding data partnership between ICES and Immigration, Refugees and Citizenship Canada that has allowed the linkage of the permanent resident file for immigrants landed in Ontario from 1985 to 2017 with ICES health administrative data. We formally engaged members of the ICES Public Advisory Council who identify either as immigrants or as members of the different ethnic communities represented in this report to provide input into a number of key decisions around data analysis, presentation of exhibits, and interpretation and contextualization of the results.

- **Keywords:** COVID-19, racialized populations, societal inequalities, health, immigrants, refugees, Ontario.

Ingen, Trevor van, Samantha Akingbola, Kevin A. Brown, Nick Daneman, Sarah A. Buchan, and Brendan T. Smith. 2021. "Neighbourhood-level risk factors of COVID-19 incidence and mortality." *medRxiv* preprint (2021.01.27.21250618). doi: <https://doi.org/10.1101/2021.01.27.21250618>.

- **Abstract**

Background: Racialized and low-income communities face disproportionately high rates of coronavirus 2019 (COVID-19) infection and death. However, data on inequities in COVID-19 across granular categories of sociodemographic characteristics is sparser.

Methods: Neighborhood-level counts of COVID-19 cases and deaths in Ontario, Canada recorded as of July 28th, 2020, were extracted from provincial and local reportable infectious disease surveillance systems. Associations between COVID-19 incidence and mortality and 18 neighborhood-level measures of immigration, race, housing, and socio-economic characteristics were estimated with Poisson generalized linear mixed models. Housing characteristic variables were subsequently added to models to explore if housing may have a confounding influence on the relationships between immigration, race, and socioeconomic status and COVID-19 incidence.

Results: There were large inequities in COVID-19 incidence and mortality across the socio-demographic variables examined. Neighborhoods having a higher proportion immigrant, racialized populations, large households, and low socio-economic status were associated with COVID-19 risk. Adjusting for housing characteristics, especially

unsuitably crowded housing, attenuated COVID-19 risks. However persistent risk remained for neighborhoods having high proportions of immigrants, racialized populations, and proportion of Black, Latin American, and South Asian residents.

Conclusions: Socio-demographic factors account for some of the neighborhood-level differences in COVID-19 across Ontario. Housing characteristics account for a portion, but not all, of the excess burden of COVID-19 experienced by immigrant, racialized, low income and low education populations.

- **Keywords:** COVID-19, neighbourhood, immigration, race, socioeconomic status, health, Ontario

Labesse, Maud Emmanuelle, and Ariane St-Louis. 2021. *Logement et inégalités sociales de santé en temps de COVID-19 : des stratégies pour des logements abordables et de qualité. Synthèse rapide des connaissances.* Montréal: Institut national de santé publique du Québec. <https://www.inspq.qc.ca/sites/default/files/publications/3152-inegalites-sociales-covid-19-strategies-logements-abordables-qualite.pdf>.

- **Résumé**

« Le présent document s’adresse au réseau de santé publique et à ses partenaires, dont les municipalités, les municipalités régionales de comté (MRC) et les organisations communautaires. Il vise à : Rappeler l’influence du logement sur la santé et la qualité de vie; Illustrer comment la pandémie de la covid-19 a exacerbé les inégalités sociales de santé en matière de logement; Décrire les impacts des mesures sanitaires, en particulier le confinement, sur la santé et la qualité de vie des populations défavorisées; Et, décrire des stratégies prometteuses pour accroître l’offre de logements sains, sécuritaires et abordables ainsi que des milieux de vie favorables à la santé. Pour ce faire, une recherche documentaire effectuée à l’aide de mots-clés à partir de deux plateformes regroupant plusieurs banques de données a été réalisée. Une consultation rapide de la littérature grise a aussi été effectuée. »

Dix messages-clés sont présentés en début du rapport qui gravitent autour de trois points : 1- Les quartiers marginalisés et l’état des logements (salubrité, taille...); 2- Les populations défavorisées sont plus exposées aux risques de la transmission de la COVID-19; et, 3- Des recommandations et des solutions aux situations exposées : offrir des aides d’urgence aux ménages en situation de crise, avoir accès à un lieu d’habitation sécuritaire, les logements sociaux...

- **Mots clés:** COVID-19, pandémie, santé publique, logement, populations défavorisées, personnes à risque, Montréal.

Marmot, Michael, Jessica Allen, Peter Goldblatt, Eleanor Herd, and Joana Morrison. 2020. *Build Back Fairer: The COVID-19 Marmot Review. The Pandemic, Socioeconomic and Health Inequalities in England.* London: Institute of Health Equity. <https://www.instituteofhealthequity.org/resources-reports/build-back-fairer-the-covid-19-marmot-review/build-back-fairer-the-covid-19-marmot-review-full-report.pdf>.

- **Abstract**

« Build Back Better has become the mantra. Important, but we need to Build Back Fairer. The levels of social, environmental and economic inequality in society are damaging health and well-being. As the UK emerges from the pandemic it would be a

tragic mistake to attempt to re-establish the status quo that existed before the pandemic – a status quo marked in England, over the past decade, by stagnation of health improvement that was the second worst in Europe and widening health inequalities... The aim of this report is three-fold: To examine inequalities in COVID-19 mortality. Focus will be on inequalities in mortality among member of Black, Asian and Minority Ethnic groups alongside continued attention to the social gradient in health. • To show the effects that the pandemic, and the societal response, have had on social and economic inequalities and effects on mental and physical health, and their likely effects on health inequalities in the future. • To make recommendations on what needs to be done. Our recommendations are made on three timescales: the long, medium, and short term. »

- **Keywords:** COVID-19, socioeconomic inequality, racism, minority ethnic group, health, mortality, England, London,

Mensah, Joseph, and Christopher J Williams. 2022. "Socio-structural Injustice, Racism, and the COVID-19 Pandemic: A Precarious Entanglement among Black Immigrants in Canada." *Social Justice Studies* 16 (1):123-142. doi: <https://doi.org/10.26522/ssj.v16i1.2690> .

- **Abstract**

As several commentators and researchers have noted since late spring 2020, COVID-19 has laid bare the connections between entrenched structurally generated inequalities on one hand, and on the other hand relatively high degrees of susceptibility to contracting COVID-19 on the part of economically marginalized population segments. Far from running along the tracks of race neutrality, studies have demonstrated that the pandemic is affecting Black people more than Whites in the U.S.A. and U.K., where reliable racially-disaggregated data are available. While the situation in Canada seems to follow the same pattern, race-specific data on COVID-19 are hard to come by. At present, there is no federal mandate to collect race-based data on COVID-19, though, in Ontario, at the municipal level, the City of Toronto has been releasing such data. This paper examines the entanglements of race, immigration status and the COVID-19 pandemic in Canada with particular emphasis on Black immigrants and non-immigrants in Toronto, using multiple forms of data pertaining to income, housing, immigration, employment and COVID-19 infections and deaths. Our findings show that the pandemic has had a disproportionate negative impact on Black people and other racialized people in Toronto and, indeed, Canada.

- **Keywords:** COVID-19, pandemic, racism, Blacks, visible minorities, Toronto, Canada

Mishra, Sharmistha, Huiting Ma, Gary Moloney, Kristy C. Y. Yiu, Dariya Darvin, David Landsman, Jeffrey C. Kwong, Andrew Calzavara, Sharon Straus, Adrienne K. Chan, Effie Gournis, Heather Rilkoff, Yiqing Xia, Alan Katz, Tyler Williamson, Kamil Malikov, Rafal Kustra, Mathieu Maheu-Giroux, Beate Sander, and Stefan D. Baral. 2022. "Increasing concentration of COVID-19 by socioeconomic determinants and geography

in Toronto, Canada: an observational study." *Annals of Epidemiology* 65:84-92. doi: <https://doi.org/10.1016/j.annepidem.2021.07.007>.

- **Abstract**

Background: Inequities in the burden of COVID-19 were observed early in Canada and around the world, suggesting economically marginalized communities faced disproportionate risks. However, there has been limited systematic assessment of how heterogeneity in risks has evolved in large urban centers over time.

Purpose: To address this gap, we quantified the magnitude of risk heterogeneity in Toronto, Ontario from January to November 2020 using a retrospective, population-based observational study using surveillance data.

Methods: We generated epidemic curves by social determinants of health (SDOH) and crude Lorenz curves by neighbourhoods to visualize inequities in the distribution of COVID-19 and estimated Gini coefficients. We examined the correlation between SDOH using Pearson-correlation coefficients.

Results: Gini coefficient of cumulative cases by population size was 0.41 (95% confidence interval [CI]:0.36–0.47) and estimated for: household income (0.20, 95%CI: 0.14–0.28); visible minority (0.21, 95%CI:0.16–0.28); recent immigration (0.12, 95%CI:0.09–0.16); suitable housing (0.21, 95%CI:0.14–0.30); multigenerational households (0.19, 95%CI:0.15–0.23); and essential workers (0.28, 95%CI:0.23–0.34).

- **Keywords:** COVID-19, SARS-CoV-2, social determinants of health, disease transmission, health inequity, Gini coefficients, Lorenz curves.

Ottawa Local Immigration Partnership. 2020. *The Impact of Covid-19 on Immigrants & Racialized Communities in Ottawa: A Community Dialogue*. Ottawa: Ottawa Local Immigration Partnership (OLIP-PLIO). <http://olip-plio.ca/wp-content/uploads/2020/11/SummaryReport-OLIP-COVID-CommunityDialogue.pdf>.

- **Abstract**

Since the beginning of the COVID-19 pandemic, the Ottawa Local Immigration Partnership (OLIP) has served as a citywide platform to understand and address the pandemic's disproportionate impact on Ottawa's immigrants and racialized communities. In line with this strategic role, OLIP partners organized and hosted the Community Dialogue on the COVID-19 Pandemic on Thursday October 22, 2020. The aim of the COVID-19 Community Dialogue was to gain the insights and contribution of communities most affected by the COVID-19 pandemic on: i) what is behind the high rate of COVID-19 infection among immigrants and racialized populations; and ii) what considerations ought to be brought to OLIP partners' efforts to design targeted prevention and protection measures. This virtual event brought together more than 70 participants including community leaders and connectors, Ottawa Public Health officials, Ottawa Health Team – Équipe Santé Ottawa representatives, settlement service providers, school board representatives, and community-based organizations. This dialogue was a unique opportunity to bring the voices of affected communities to ongoing community-wide efforts to respond to the COVID-19 pandemic. The dialogue included presentations from OLIP partners and facilitated discussions about experiences of communities with COVID-19. Ottawa Public Health presented an analysis of disaggregated sociodemographic data on Ottawa residents who tested positive for COVID-19. OLIP provided a preliminary census data analysis of the key factors that may be contributing to the disproportionate impact of the pandemic on immigrants and racialized population. And the Ottawa Health Team – Équipe Santé Ottawa shared information on targeted prevention and protection measures that are currently underway. These presentations were followed by rich and lively discussions as OLIP partners listened to insights of members of affected communities. This report summarizes the content of the COVID-19 Community Dialogue for the purpose of reflecting back key content and information to community leaders and connectors who shared their time and knowledge so generously. The report also serves as a resource for OLIP partners to build on as we continue planning – in collaboration with affected – for ways to mitigate the health risks facing immigrants and racialized populations in Ottawa.

- **Keywords:** COVID-19, pandemic, marginalized community, racialized populations health, Ottawa

Ottawa Public Health. 2020. *Report: COVID-19 and Racial Identity in Ottawa, February to August 2020*. <https://www.ottawapublichealth.ca/en/reports-research-and-statistics/resources/Documents/covid-19/Special-Focus/Report--COVID-19-and-Racial-Identity-in-Ottawa-2020.pdf>.

- **Abstract**

“The COVID-19 pandemic is highlighting structural and systemic inequities and barriers to health and social services that pre-existed COVID-19. Long-term solutions are needed to address underlying social determinants of health such as racism, income, housing, and employment. • Collecting and analyzing sociodemographic data can help to remove barriers to health and social services, identify needed community supports, and work toward longer-term health equity. • Analysis of sociodemographic data has shown that, similar to elsewhere, COVID-19 has disproportionately impacted people who are racialized. In Ottawa, particularly Black communities. • Racialized communities may have difficulty limiting exposure to COVID-19 due to factors such as higher density housing that makes physical distancing difficult and/or employment in essential work and that is often ‘precarious’ - low-wage, temporary, unstable and without pensions and benefits (e.g., emergency or sick leave). • There is a need to work collectively with affected communities to understand people’s lived experience to inform solutions in order to improve access to health and social services and prevent further transmission.”

- **Keywords:** COVID-19, racism, racialized communities, health equity, Ottawa, pandemic.

Ouédraogo, Mady, Véronique Nadeau-Grenier, Maude Landry, Pana Magnoudewa Priscille, Maude Landreville, Valérie Lemieux, Maxime Roy, and Marlène Ginard. 2021. *Inégalités sociales de santé : Analyses sur les liens entre la défavorisation matérielle, la transmission de la covid-19 et la mortalité associée. Version détaillée.* Montréal: Direction régionale de santé publique de Montréal, CIUSSS du Centre-Sud-de-l’Île-de-Montréal. <https://santemontreal.qc.ca/fileadmin/fichiers/Campagnes/coronavirus/situation-2montreal/point-sante/inegalites-montreal/Inegaux-Pandemie-EcartQuiPersistent-FR.pdf>.

- **Résumé**

Selon les données récentes, la pandémie actuelle affecterait plus certains groupes sociaux que d’autres. Des études menées à ce sujet révèlent que les populations vulnérables, notamment les personnes à faibles revenus, les personnes occupant des emplois précaires, les personnes vivant dans des secteurs défavorisés, sont davantage représentées parmi les cas et les décès liés à la COVID-19. Au printemps 2020, une publication de la Direction de santé publique de Montréal sur les inégalités de santé à Montréal faisait ressortir des écarts. Les personnes atteintes de la COVID-19 étaient alors 2,5 fois plus nombreuses dans les secteurs très défavorisés que dans les secteurs très favorisés. Les nouvelles analyses présentées dans ce feuillet montrent notamment que les écarts persistent, que la défavorisation est associée à une plus forte mortalité par COVID-19 et que certains territoires sont plus touchés par les décès.

- **Mots clés:** Pandémie, COVID-19, inégalité de santé, territoires défavorisés, Montréal.

Rocha, Roberto, Benjamin Shingler, and Jonathan Montpetit. 2020. "Montreal's poorest and most racially diverse neighbourhoods hit hardest by COVID-19, data analysis shows. Census data shows how race, housing and income correlate to spread of COVID-19." *CBC*

News - Montreal, 2020-06-11. <https://www.cbc.ca/news/canada/montreal/race-covid-19-montreal-data-census-1.5607123>.

- **Abstract**

« Since the start of the pandemic, Montreal districts with higher numbers of Black people and more cramped housing have registered the most cases of COVID-19, according to an analysis by CBC News. The findings confirm what many already suspected, given the high death toll in low-income, racially diverse neighbourhoods like Montréal-Nord, where 222 people have died from the virus — more than in all of British Columbia. They also echo observations made in other major North American cities, where the novel coronavirus has disproportionately affected the poorest and most racially diverse neighbourhoods. »

- **Keywords:** Pandemic, racially diverse neighbourhoods, COVID-19, North America.

Ruprecht, Megan M., Xinzi Wang, Amy K. Johnson, Jiayi Xu, Dylan Felt, Siobhan Ihenacho, Patrick Stonehouse, Caleb W. Curry, Catherine DeBroux, Diogo Costa, and Gregory Phillips II. 2021. "Evidence of Social and Structural COVID-19 Disparities by Sexual Orientation, Gender Identity, and Race/Ethnicity in an Urban Environment." *Journal of Urban Health* 98 (1):27-40. doi: 10.1007/s11524-020-00497-9.

- **Abstract**

The ongoing COVID-19 pandemic has had widespread social, psychological, and economic impacts. However, these impacts are not distributed equally: already marginalized populations, specifically racial/ ethnic minority groups and sexual and gender minority populations, may be more likely to suffer the effects of COVID-19. The COVID-19 Resiliency Survey was conducted by the city of Chicago to assess the impact of COVID-19 on city residents in the wake of Chicago's initial lockdown, with particular focus on the experiences of minority populations. Chi-square tests of independence were performed to compare COVID-19- related outcomes and impacts on heterosexual vs. sexual minority populations, cisgender vs. gender minority populations, and White vs. racial/ethnic minority subgroups. Marginalized populations experienced significant disparities in COVID-19 exposure, susceptibility, and treatment access, as well as in psychosocial effects of the pandemic. Notably, Black and Latinx populations reported significant difficulties accessing food and supplies ($p = 0.002$). Healthcare access disparities were also visible, with Black and Latinx respondents reporting significantly lower levels of access to a provider to see if COVID-19 testing would be appropriate ($p = 0.013$), medical services ($p = 0.001$), and use of telehealth for mental health services ($p = 0.001$). Sexual minority respondents reported significantly lower rates of using telehealth for mental health services ($p = 0.011$), and gender minority respondents reported significantly lower levels of primary care provider access ($p = 0.016$). There are evident COVID-19 disparities experienced in Chicago especially for Black, Latinx, sexual minority, and gender minority groups. A greater focus must be paid to health equity, including providing increased resources and supplies for affected groups, adapting to inequities in the built environment, and ensuring

adequate access to healthcare services to ameliorate the burden of COVID-19 on these marginalized populations.

- **Keywords:** COVID-19, health disparities, sexual and gender minority populations, racial/ethnic minority populations, pandemic response

Shields, John, and Zainab Abu Alrob. 2021. "The Political Economy of a Modern Pandemic: Assessing Impacts of COVID-19 on Migrants and Immigrants in Canada." *Alternate Routes: A Journal of Critical Social Research* 32 (1).

- **Abstract**

This paper explores the COVID-19 crisis with a focus on immigration and migration in Canada using a political economy lens. Neoliberalism has played a major role in shaping pandemic impacts and the responses to it. We critically assess the deep structural inequalities that have caused disproportionate COVID-19 impacts on migrants and immigrants. Migrants and immigrants carry the unequal burden of COVID-19 because of racialization, labour precariousness, and exposure to health risks on job sites and in the poor neighborhoods and overcrowded housing in which many live in. Mobility and borders have also been cast as a particular threat during the pandemic even though domestic sources are the main sources of contagion. We examine the use of borders as filtering mechanisms during COVID-19 and the negative impacts this has had on migrant populations. While crises like pandemics pose many dangers, they also open up policy windows through which progressive change may be realized. We reflect on these possibilities.

- **Keywords:** COVID-19, borders, immigration/migration, neoliberalism, pandemic discrimination.

Spotswood, Erica N., Matthew Benjamin, Lauren Stoneburner, Megan M. Wheeler, Erin E. Beller, Deborah Balk, Timon McPhearson, Ming Kuo, and Robert I. McDonald. 2021. "Nature inequity and higher COVID-19 case rates in less-green neighbourhoods in the United States." *Nature Sustainability* 4 (12):1092-1098. doi: 10.1038/s41893-021-00781-9.

- **Abstract**

Urban nature—such as greenness and parks—can alleviate distress and provide space for safe recreation during the COVID-19 pandemic. However, nature is often less available in low-income populations and communities of colour the same communities hardest hit by COVID-19. In analyses of two datasets, we quantified inequity in greenness and park proximity across all urbanized areas in the United States and linked greenness and park access to COVID-19 case rates for ZIP codes in 17 states. Areas with majority persons of colour had both higher case rates and less greenness. Furthermore, when controlling for sociodemographic variables, an increase of 0.1 in the Normalized Difference Vegetation Index was associated with a 4.1% decrease in COVID-19 incidence rates (95% confidence interval: 0.9–6.8%). Across the United States, block groups with lower income and majority persons of colour are less green and have fewer parks. Our results demonstrate that the communities most impacted by COVID-19 also have the least nature nearby. Given

that urban nature is associated with both human health and biodiversity, these results have far-reaching implications both during and beyond the pandemic.

- **Keywords:** COVID-19, marginalized neighbourhoods, racism, marginalized population, persons of colour, urban green parc, United States.

Subedi, Rajendra, Lawson Greenberg, et Martin Turcotte. 2020. *Taux de mortalité attribuable à la COVID-19 dans les quartiers ethnoculturels du Canada*. Ottawa: Statistique Canada. <https://www150.statcan.gc.ca/n1/fr/pub/45-28-0001/2020001/article/00079-fra.pdf>.

- **Résumé**

« Des études menées dans d'autres pays comme les États-Unis ont montré, à l'échelle du quartier, une variation importante des décès attribuables à la COVID-19 selon les déterminants sociaux de la santé comme l'âge, le sexe, l'ethnicité, le revenu et l'éducation. Cependant, peu d'analyses ont été menées, au Canada, pour examiner ces différences entre les quartiers à l'échelle nationale. Pour diverses raisons, les groupes de population désignés comme minorités visibles courent un risque accru d'infection et de mortalité attribuable à la COVID-19. Premièrement, un grand nombre de ces groupes de population affichent des taux de pauvreté plus élevés et sont surreprésentés dans les quartiers défavorisés sur le plan socioéconomique. De plus, les Canadiens qui appartiennent à des groupes désignés comme minorités visibles sont plus susceptibles de vivre dans des logements surpeuplés et de travailler dans des professions liées à un risque accru d'exposition au virus (...) La présente étude a pour objectif de déterminer si, pendant la première vague de la pandémie, les taux de mortalité attribuable à la COVID-19 étaient plus élevés dans les quartiers canadiens caractérisés par des proportions plus importantes de groupes de population désignés comme minorités visibles. Les données provenant de la Base canadienne de données sur les décès de la Statistique de l'état civil, publiées le 28 octobre 2020, sont utilisées pour estimer les taux de mortalité présentés dans cette étude (...) Les informations au niveau des quartiers proviennent du recensement de la population de 2016 (...) ».

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Subedi, Rajendra, Lawson Greenberg, and Martin Turcotte. 2020. *COVID-19 mortality rates in Canada's ethno-cultural neighbourhoods*. Ottawa: Statistics Canada. https://publications.gc.ca/collections/collection_2020/statcan/45-28/CS45-28-1-2020-79-eng.pdf

- **Abstract**

“The COVID-19 pandemic has intensified pre-existing inequities in Canadian society and has highlighted the need for disaggregated data about the ways that population groups designated as visible minorities are being disproportionately affected. Studies in other countries like the United States have shown a significant variation in deaths attributed to COVID-19 based on neighbourhood-level social determinants of health such as age, sex, ethnicity, income and education.^{1,2,3} However, there has been limited analysis undertaken to investigate these differences between neighbourhoods at the national level in Canada.⁴ Population groups

designated as visible minorities are, for a number of reasons, at increased risk of COVID-19 infection and mortality. First, many of these population groups have higher poverty rates and are over-represented in socio-economically disadvantaged neighbourhoods.⁶ Furthermore, Canadians belonging to groups designated as visible minorities are more likely to live in overcrowded housing conditions⁷ and to work in occupations associated with greater risk of exposure to the virus.⁸ The objective of this study is to examine whether COVID-19 mortality rates were higher, during the first wave of the pandemic, in Canadian neighbourhoods characterized by higher proportions of population groups designated as visible minorities. Canadian Vital Statistics Death data, released on October 28th, 2020, are used to estimate the mortality rates presented in this study. It is important to note that these data are provisional, as some deaths which occurred during the reference period have not yet been reported.⁹ The neighbourhood level information comes from the 2016 Census of population (...)"

- **Keywords:** COVID-19, neighbourhoods, disadvantaged neighbourhoods, ethnocultural minorities, housing, deaths, Canada

Sundaram, Maria E., Andrew Calzavara, Sharmistha Mishra, Rafal Kustra, Adrienne K. Chan, Mackenzie A. Hamilton, Mohamed Djebli, Laura C. Rosella, Tristan Watson, Hong Chen, Branson Chen, Stefan D. Baral, and Jeffrey C. Kwong. 2021. "Individual and social determinants of SARS-CoV-2 testing and positivity in Ontario, Canada: a population-wide study." *Canadian Medical Association Journal* 193 (20):E723-E734. doi: 10.1503/cmaj.202608.

- **Abstract**

BACKGROUND: Optimizing the public health response to reduce the burden of COVID-19 necessitates characterizing population-level heterogeneity of risks for the disease. However, heterogeneity in SARS-CoV-2 testing may introduce biased estimates depending on analytic design. We aimed to explore the potential for collider bias in a large study of disease determinants, and evaluate individual, environmental, and social determinants associated with SARS-CoV-2 testing and diagnosis among residents of Ontario, Canada. **METHODS:** We explored the potential for collider bias and characterized individual, environmental, and social determinants of being tested and testing positive for SARS-CoV-2 infection using cross-sectional analyses among 14.7 million community-dwelling people in Ontario, Canada. Among those with a diagnosis, we used separate analytic designs to compare predictors of people testing positive versus negative; symptomatic people testing positive versus testing negative; and people testing positive versus people not testing positive (i.e., testing negative or not being tested). Our analyses included tests conducted between Mar. 1 and June 20, 2020.

RESULTS: Of 14 695 579 people, we found that 758 691 were tested for SARS-CoV-2, of whom 25 030 (3.3%) had a positive test result. The further the odds of testing from the null, the more variability we generally observed in the odds of diagnosis across analytic design, particularly among individual factors. We found that there was less variability in testing by social determinants across analytic designs. Residing in areas with the highest household density (adjusted odds ratio [OR] 1.86, 95% confidence interval [CI] 1.75–

1.98), highest proportion of essential workers (adjusted OR 1.58, 95% CI 1.48–1.69), lowest educational attainment (adjusted OR 1.33, 95% CI 1.26–1.41) and highest proportion of recent immigrants (adjusted OR 1.10, 95% CI 1.05– 1.15) were consistently related to increased odds of SARS-CoV-2 diagnosis regardless of analytic design.

INTERPRETATION: Where testing is limited, our results suggest that risk factors may be better estimated using population comparators rather than test-negative comparators. Optimizing COVID-19 responses necessitates investment in and sufficient coverage of structural interventions tailored to heterogeneity in social determinants of risk, including household crowding, occupation, and structural racism.

- **Keywords:** COVID-19, public health, essential workers, recent immigrant, SARS-CoV-2, Ontario.

Upshaw, Tara L., Chloe Brown, Robert Smith, Melissa Perri, Carolyn Ziegler, and Andrew D. Pinto. 2021. "Social determinants of COVID-19 incidence and outcomes: A rapid review." *PLOS ONE* 16 (3): e0248336. doi: 10.1371/journal.pone.0248336.

- **Abstract**

Early reports indicate that the social determinants of health are implicated in COVID-19 incidence and outcomes. To inform the ongoing response to the pandemic, we conducted a rapid review of peer-reviewed studies to examine the social determinants of COVID-19. We searched Ovid MEDLINE, Embase, PsycINFO, CINAHL and Cochrane Central Register of Controlled Trials from December 1, 2019, to April 27, 2020. We also searched the bibliographies of included studies, COVID-19 evidence repositories and living evidence maps, and consulted with expert colleagues internationally. We included studies identified through these supplementary sources up to June 25, 2020. We included English-language peer-reviewed quantitative studies that used primary data to describe the social determinants of COVID-19 incidence, clinical presentation, health service use and outcomes in adults with a confirmed or presumptive diagnosis of COVID-19. Two reviewers extracted data and conducted quality assessment, confirmed by a third reviewer. Forty-two studies met inclusion criteria. The strongest evidence was from three large observational studies that found associations between race or ethnicity and socioeconomic deprivation and increased likelihood of COVID-19 incidence and subsequent hospitalization. Limited evidence was available on other key determinants, including occupation, educational attainment, housing status and food security. Assessing associations between sociodemographic factors and COVID-19 was limited by small samples, descriptive study designs, and the timeframe of our search. Systematic reviews of literature published subsequently are required to fully understand the magnitude of any effects and predictive utility of sociodemographic factors related to COVID-19 incidence and outcomes.

- **Keywords:** COVID-19, pandemic, housing, health, race, ethnic minority, socioeconomic inequality,

Watson, Tristan, Jeffrey C. Kwong, Kathy Kornas, Sharmistha Mishra, and Laura C. Rosella. 2021. "Neighbourhood characteristics associated with the geographic variation in laboratory confirmed COVID-19 in Ontario, Canada: a multilevel analysis." *medRxiv preprints* (2021 April 2). doi: <https://doi.org/10.1101/2021.04.06.21254988>.

- **Abstract**

Purpose: There is limited information on the role of individual- and neighbourhood-level characteristics in explaining the geographic variation in the novel coronavirus 2019 (COVID-19) between regions. This study quantified the magnitude of the variation in COVID-19 rates between neighbourhoods in Ontario, Canada, and examined the extent to which neighbourhood-level differences are explained by census-based neighbourhood measures, after adjusting for individual-level covariates (i.e., age, sex, and chronic conditions).

Methods: We conducted a multilevel population-based study of individuals nested within neighbourhoods. COVID-19 laboratory testing data were obtained from a centralized laboratory database and linked to health-administrative data. The median rate ratio and the variance partition coefficient were used to quantify the magnitude of the neighbourhood-level characteristics on the variation of COVID-19 rates.

Results: The unadjusted median rate ratio for the between-neighbourhood variation in COVID-19 was 2.22. In the fully adjusted regression models, the individual- and neighbourhood-level covariates accounted for about 44% of the variation in COVID-19 between neighbourhoods, with 43% attributable to neighbourhood-level census-based characteristics.

Conclusion: Neighbourhood-level characteristics could explain almost half of the observed geographic variation in COVID-19. Understanding how neighbourhood-level characteristics influence COVID-19 rates can support jurisdictions in creating effective and equitable intervention strategies.

- **Keywords:** COVID-19; multilevel analysis; social environment; clustered data; disparity.

Xia, Yiqing, Huiting Ma, Gary Moloney, Héctor A. Velásquez García, Monica Sirski, Naveed Z. Janjua, David Vickers, Tyler Williamson, Alan Katz, Kristy Yu, Rafal Kustra, David L Buckeridge, Marc Brisson, Stefan D Baral, Sharmistha Mishra, and Mathieu Maheu-Giroux. 2021. "Geographical concentration of COVID-19 cases by social determinants of health in 16 large metropolitan areas in Canada – a cross-sectional study." *medRxiv preprints* (2021 July 26). doi: <https://doi.org/10.1101/2021.07.23.21261039>.

- **Abstract**

Background: There is a growing recognition that strategies to reduce SARS-CoV-2 transmission should be responsive to local transmission dynamics. Studies have revealed inequalities along social determinants of health, but little investigation was conducted surrounding geographic concentration within cities. We quantified social determinants of geographic concentration of COVID-19 cases across sixteen census metropolitan areas (CMA) in four Canadian provinces.

Methods: We used surveillance data on confirmed COVID-19 cases at the level of dissemination area. Gini (co-Gini) coefficients were calculated by CMA based on the proportion of the population in ranks of diagnosed cases and each social determinant using census data (income, education, visible minority, recent immigration, suitable housing, and essential workers) and the corresponding share of cases. Heterogeneity was visualized using Lorenz (concentration) curves.

Results: Geographic concentration was observed in all CMAs (half of the cumulative cases were concentrated among 21-35% of each city's population): with the greatest geographic heterogeneity in Ontario CMAs (Gini coefficients, 0.32-0.47), followed by British Columbia (0.23-0.36), Manitoba (0.32), and Québec (0.28-0.37). Cases were disproportionately concentrated in areas with lower income, education attainment, and suitable housing, and higher proportion of visible minorities, recent immigrants, and essential workers. Although a consistent feature across CMAs was concentration by proportion visible minorities, the magnitude of concentration by social determinants varied across CMAs.

Interpretation: The feature of geographical concentration of COVID-19 cases was consistent across CMAs, but the pattern by social determinants varied. Geographically prioritized allocation of resources and services should be tailored to the local drivers of inequalities in transmission in response to SARS-CoV-2's resurgence.

- **Keywords:** COVID-19, public health, SARS-CoV-2, geographic concentration, visible minorities, social determinants, Canada.

Travail essentiel, travail pauvre / *Essential workers, working poor*

Bascaramurty, Dakshana, and Vrunda Bhatt. 2021. "Inside l6p: Impossible choices: How this Brampton community explains Canada's Covid-19 crisis like no other." *The Globe and Mail*, 2021-05-20. <https://www.theglobeandmail.com/canada/article-l6p-brampton-english/>.

- **Abstract**

In a viral public service announcement in January, Ontario Premier Doug Ford – speaking in Punjabi, L6P's dominant mother tongue after English – urged Mr. Garg and his neighbours to “*ghare raho*,” or stay home. Among the more than 82,000 people who live there, few have had the luxury of following that advice. And so many of them have wound up at the local COVID-19 assessment centre, at Brampton Civic Hospital's ICU or at the local morgue.

- **Keywords:** COVID-19, pandemic, public health, Brampton community, Canada.

Chagla, Zain, Huiting Ma, Beate Sander, Stefan D. Baral, Gary Moloney, and Sharmistha Mishra. 2021. Assessment of the Burden of SARS-CoV-2 Variants of Concern Among Essential Workers in the Greater Toronto Area, Canada. Research Letter. *JAMA network open* 4 (10): e2130284. Accessed 2021/10//. doi:10.1001/jamanetworkopen.2021.30284.

- **Abstract**

“Variants of concern (VOC) of SARS-CoV-2 emerged toward the end of 2020. These resulted in documented replacement of wildtype SARS-CoV-2, with concerns of transmissibility, virulence, and immune escape, and were subsequently classified by an alphabetical system by the World Health Organization. Prior to the emergence of VOC, across countries, SARS-CoV-2 transmission and COVID-19 were disproportionately concentrated in neighborhoods of low socioeconomic status, which are characterized by a larger proportion of frontline essential workers, and higher density contact networks.² We created a retrospective cohort of neighborhoods in the City of Toronto and Region of Peel, two of the most populous and most affected per capita regions of Ontario, stratified by income and essential work status, and noted the emergence of VOC through this population.”

- **Keywords:** COVID-19, essential workers, health, SARS-CoV-2, marginalized neighborhoods, Toronto.

Chiodo, Sabrina, Emmalin Buajitti, and Laura C. Rosella. 2021. "Epidemiology of Covid-19 among Healthcare Workers in Ontario, Canada during the First Pandemic Wave." *University of Toronto Journal of Public Health* 2 (1):1-9. doi: <https://doi.org/10.33137/utjph.v2i1.35936>.

- **Abstract**

Aim and objectives: This study aims to describe and compare COVID-19 cases among healthcare workers, long-term care residents, the general population in Ontario, Canada, considering baseline characteristics, trends over time and socioeconomic status

Methods: This study used test-confirmed COVID-19 case reports between March 13th, 2020, to June 15th, 2020. Reported by Ontario’s Public Health Units to the Ontario Ministry of Health Public Health Case and Contact Management Solution (CCM). Cases were stratified into three sub-populations based on risk group characteristics identified in CCM data: healthcare workers, long-term care residents, and the general population. The residential postal codes of the cases reported to CCM were linked to geographic characteristics and case outcomes were captured in CCM data for each case.

Results: COVID-19 cases among healthcare workers were more concentrated between working ages of 20-59 and in females, compared to the general population and long-term care cases. Additionally, hospitalization and mortality were low among healthcare workers compared to the other sub-population. Over time, COVID-19 cases decreased among healthcare workers. For both healthcare workers and the general population, more cases were observed in areas of high material deprivation, and this disparity between high- and low-income areas increased over time.

Conclusion: Healthcare workers are a known high-risk group for COVID-19. For the surveillance of this disease, it is important to understand how they compare to other population groups regarding infection, hospitalization, and mortality. Our analysis shows clear socioeconomic gradients in the distribution of the disease. Thus, focusing our efforts on identifying and testing healthcare workers that work or live in lower socioeconomic

areas would benefit the residents and workers in these areas and support the ongoing COVID-19 response.

- **Keywords:** COVID-19, Healthcare workers, Ontario, Health, socioeconomic disparity

Dowling, Emma. 2021. "Caring in Times of a Global Pandemic. Introduction." *Historical Social Research / Historische Sozialforschung* 46 (4):7-30. <https://www.jstor.org/stable/27081872>

- **Abstract**

Caring in Times of a Global Pandemic investigates the impact of the COVID-19 pandemic and the measures to contain it in a cross-national perspective with regard to the areas of care, social reproduction, and affective security policies. The COVID-19 pandemic exacerbated an existing crisis across different unpaid and paid domains of care and social reproduction. It revealed just who exactly keeps life going by doing the jobs that no society can do without. The management of the pandemic relied on significant swathes of unpaid or underpaid care work without sufficient consideration of the conditions under which this work is carried out and without providing sufficient resources and support. Self-organised practices of care and mutual aid in the pandemic potentially pointed to the possibilities of more progressive or even radical care infrastructures, while public welfare, health, and social care systems were vital in responding adequately and inclusively to the pandemic. In the wake of the pandemic, a key question is how capitalist economies will adjust, and how the pandemic may act as a catalyst for change. This article introduces the topic and presents the individual contributions to the HSR Forum.

- **Keywords:** Affect, care, crisis, COVID-19, governance, security, social inequality, social reproduction.

Goudet, Anna. 2020. *Demandeurs d'asile travaillant dans les services essentiels : près de 400 témoignages*. Montréal: Table de concertation des organismes au service des personnes réfugiées et immigrantes (TCRI). [http://tcri.qc.ca/images/publications/memoires/2020/Rapport de recherche DA travaillant dans les services essentiels TCRI.pdf](http://tcri.qc.ca/images/publications/memoires/2020/Rapport_de_recherche_DA_travaillant_dans_les_services_essentiels_TCRI.pdf)

- **Abstract**

« Ce sondage est une initiative de la Table de concertation des organismes au service des personnes réfugiées et immigrantes (TCRI) pour mieux comprendre la réalité des personnes revendiquant l'asile et travaillant dans les services essentiels au Québec pendant les mesures d'urgence liées à la pandémie de la COVID-19. Ce sondage a recueilli 393 réponses (...) Les données de ce sondage rendent visible la participation et les conditions de vie des demandeurs d'asile travaillant dans les services essentiels pendant la pandémie de COVID-19 au Québec. Les témoignages soulignent notamment leurs conditions de travail difficiles et le manque de protection personnelle contre les risques d'infection à la COVID-19. De grandes préoccupations concernent leur risque d'infection

au travail, mais également l'anxiété et la culpabilité de contaminer leurs enfants et leur entourage. Si ces préoccupations sont certainement partagées par l'ensemble des travailleur.se.s essentiel.les, elles sont toutefois accrues par les situations d'isolement et de précarité des droits des personnes arrivées récemment au Québec et revendiquant l'asile (...), afin d'améliorer les conditions de vie des personnes revendiquant l'asile et travaillant dans les services essentiels pendant la pandémie de COVID-19, plusieurs recommandations sont suggérées.»

- **Mots clés**: COVID-19, pandémie, demandeurs d'asile, travailleur(se)s essentiel(le)s, conditions de travail, Québec.

Kabeer, Naila, Shahra Razavi, and Yana van der Meulen Rodgers. 2021. "Feminist Economic Perspectives on the COVID-19 Pandemic." *Feminist Economics* 27 (1-2):1-29. doi: 10.1080/13545701.2021.1876906.

- **Abstract**

This article provides a contextual framework for understanding the gendered dimensions of the COVID-19 pandemic and its health, social, and economic outcomes. The pandemic has generated massive losses in lives, impacted people's health, disrupted markets and livelihoods, and created profound reverberations in the home. In 112 countries that reported sex-disaggregated data on COVID-19 cases, men showed an overall higher infection rate than women, and an even higher mortality rate. However, women's relatively high representation in sectors hardest hit by lockdown orders has translated into larger declines in employment for women than men in numerous countries. Evidence also indicates that stay-at-home orders have increased unpaid care workloads, which have fallen disproportionately to women. Further, domestic violence has increased in frequency and severity across countries. The article concludes that policy response strategies to the crisis by women leaders have contributed to more favorable outcomes compared to outcomes in countries led by men.

- **Keywords**: COVID-19, pandemic, care, coronavirus, gender gap, crisis

Koebel, Kourtney, and Dionne Pohler. 2020. "Labor Markets in Crisis: The Double Liability of Low-Wage Work During COVID-19." *Industrial Relations: A Journal of Economy and Society* 59 (4):503-531. doi: <https://doi.org/10.1111/irel.12269>.

- **Abstract**

We adopt a novel identification strategy to examine the heterogeneous effects of Canada's COVID-19 economic shutdown on hours worked across the earnings distribution. Early labor-market analyses found that workers in the bottom of the earnings distribution experienced a much larger reduction in hours worked than workers in the top of the earnings distribution. Our analysis reveals a double liability of low-wage work during Canada's COVID-19 economic shutdown: while workers in every quintile experienced a large reduction in hours on average, significant increases in hours were only present among workers in the bottom quintile. Implications for crisis income supports are discussed.

- **Keywords**: COVID-19, Canada, economic shutdown, workers.

Lewandowski, Piotr, Katarzyna Lipowska, and Iga Magda. 2021. "The Gender Dimension of Occupational Exposure to Contagion in Europe." *Feminist Economics* 27 (1-2):48-65. doi: 10.1080/13545701.2021.1880016.

- **Abstract**

We study the gender dimension of occupational exposure to contagious diseases spread by the respiratory or close-contact route. We show that in Europe, women are more exposed to contagion, as they are more likely than men to work in occupations that require contact with diseases, frequent contact with clients, and high levels of physical proximity at work. Women are also more likely than men to be unable to work from home, which contributes to their increased exposure. Gender is a more important factor in workers' exposure to contagion than their education or age. This gender difference in exposure can be largely attributed to patterns of sectoral segregation, and to the segregation of women within sectors into occupations that require more interpersonal interactions. While workers in Southern European countries are the most exposed to contagion, the gender differences in exposure are greatest in the Nordic and Continental European countries.

- **Keywords:** COVID-19, Europe, gender, workers, pandemic

Maaranen, Richard, and John Stapleton. 2021. "Working Poverty, Mutual Dependence & Covid-19." <https://openpolicyontario.s3.amazonaws.com/uploads/2021/05/Mutually-Dependent-Working-Poor-Toronto-CMA-20-April-2021-js.pptx>

- **Keywords:** COVID-19, working poor, immigrants, gender, racial group, housing, Toronto.

Messacar, Derek, René Morissette, et Zechuan Deng. 2020. Inégalités en matière de faisabilité du travail à domicile pendant et après la COVID-19. Ottawa: Statistique Canada (No au catalogue 45280001). <https://www150.statcan.gc.ca/n1/en/pub/45-28-0001/2020001/article/00029-fra.pdf>.

- **Résumé**

L'interruption des activités économiques visant à arrêter la propagation de la COVID-19 a entraîné une forte baisse de l'emploi et du nombre d'heures travaillées pour de nombreux Canadiens. Pour les travailleurs des services essentiels, pour ceux qui occupent des emplois dont les tâches peuvent être effectuées dans le respect des mesures de distanciation physique appropriées, ou pour ceux dont le travail peut être effectué à domicile, la probabilité de subir un arrêt de travail pendant la pandémie est plus faible que pour les autres travailleurs. Environ 40 % des Canadiens occupent des emplois pouvant être exercés à domicile (Deng et coll., 2020). Toutefois, les Canadiens n'ont pas la même probabilité d'occuper de tels emplois. Par exemple, les travailleurs des secteurs producteurs de biens sont moins nombreux à pouvoir travailler à domicile que ceux des industries de services (Deng et coll., 2020). Ces différences en matière de faisabilité du travail à domicile jouent un rôle important pendant la pandémie. En effet, le fait d'occuper un emploi pouvant être exercé à domicile réduit la probabilité de subir un arrêt de travail et diminue donc

l'incertitude du revenu. Après la pandémie, les Canadiens occupant de tels emplois, et leur famille, pourraient disposer d'un plus grand nombre de possibilités en matière d'équilibre travail-vie personnelle. Afin de faire la lumière sur ces enjeux, cet article examine dans quelle mesure la faisabilité du travail à domicile varie parmi les familles canadiennes. Il traite également des conséquences de ces différences sur l'inégalité des gains familiaux.

- **Mots clés :** Pandémie, COVID-19, inégalités socioéconomiques, Canada, travail à la maison.

Messacar, Derek, René Morissette, and Zechuan Deng. 2020. Inequality in the feasibility of working from home during and after COVID-19. Ottawa: Statistics Canada (catalogue no. 45280001). <https://www150.statcan.gc.ca/n1/pub/45-28-0001/2020001/article/00029-eng.pdf>

- **Abstract**

The economic lockdown to stop the spread of COVID-19 has led to steep declines in employment and hours worked for many Canadians. For workers in essential services, in jobs that can be done with proper physical distancing measures or in jobs that can be done from home, the likelihood of experiencing a work interruption during the pandemic is lower than for other workers. Approximately 40% of Canadians are in jobs that can be done from home (Deng et al. 2020) and the likelihood of holding such a job is not the same for all Canadians. For example, fewer workers in goods-producing sectors can work from home than those in service industries (Deng et al. 2020). These differences in the feasibility of working from home are important during the pandemic because holding jobs that can be done from home reduces the likelihood of work interruptions and, thus, reduces income uncertainty. After the pandemic, holding such jobs might increase the options that Canadian families face regarding work-life balance. To shed light on these issues, this article assesses how the feasibility of working from home varies across Canadian families. It also considers the implications of these differences for family earnings inequality.

- **Keywords:** Pandemic, COVID-19, socioeconomic inequalities, working from home, Canada.

Rao, Amrita, Huiting Ma, Gary Moloney, Jeffrey C. Kwong, Peter Jüni, Beate Sander, Rafal Kustra, Stefan D. Baral, and Sharmistha Mishra. 2021. "A disproportionate epidemic: COVID-19 cases and deaths among essential workers in Toronto, Canada." *Annals of Epidemiology* 63:63-67. doi: <https://doi.org/10.1016/j.annepidem.2021.07.010>.

- **Abstract**

Shelter-in-place mandates and closure of nonessential businesses have been central to COVID19 response strategies including in Toronto, Canada. Approximately half of the working population in Canada are employed in occupations that do not allow for remote work suggesting potentially limited impact of some of the strategies proposed to mitigate COVID-19 acquisition and onward transmission risks and associated morbidity and mortality. We compared per capita rates of COVID-19 cases and deaths from January 23, 2020 to January 24, 2021, across neighborhoods in Toronto by proportion of the population

working in essential services. We used person-level data on laboratory-confirmed COVID-19 community cases and deaths, and census data for neighborhood-level attributes. Cumulative per capita rates of COVID-19 cases and deaths were 3.3-fold and 2.5-fold higher, respectively, in neighborhoods with the highest versus lowest concentration of essential workers. Findings suggest that the population who continued to serve the essential needs of society throughout COVID-19 shouldered a disproportionate burden of transmission and deaths. Taken together, results signal the need for active intervention strategies to complement restrictive measures to optimize both the equity and effectiveness of COVID-19 responses.

- **Keywords:** COVID-19, essential workers, disease transmission, health inequity, infectious disease

St-Denis, Xavier. 2020. "Sociodemographic Determinants of Occupational Risks of Exposure to COVID-19 in Canada." *Canadian Review of Sociology/Revue canadienne de sociologie* 57 (3):399-452. doi: <https://doi.org/10.1111/cars.12288>

- **Abstract**

The activities performed by Canadian workers in some occupations may increase the risk of exposure to infectious diseases such as COVID-19. This research note explores how occupational exposure risks vary by labor force characteristics using publicly available Canadian data in combination with a data set providing information on the level of physical proximity and frequency of exposure to infections or diseases faced by workers in different occupations. The results show important sociodemographic differences. First, women work in occupations associated with significantly higher average risks of exposure to COVID-19 than men. This is driven by their over-representation in high-risk broad occupational categories such as health occupations. Second, older workers (65 years or more), a group vulnerable to COVID-19, appear to work in occupations requiring performing activities characterized by a lower level of physical proximity than their younger colleagues, with minimal differences in the frequency of exposure to diseases or infections. Finally, workers in low-income occupations are employed in occupations that put them at greater risk of exposure to COVID-19 than other workers. This is especially the case for women, immigrants, and members of visible minority groups in low-income occupations. More broadly, this research note provides insights into the health-related dimension of the literature on occupational tasks and labor market stratification.

- **Keywords:** COVID-19, health, ages, gender, labour market, vulnerability, Canada

- **Résumé**

Les tâches effectuées par les travailleurs canadiens dans certaines professions peuvent augmenter le risque d'exposition à des maladies infectieuses tel que la COVID-19. Cette note de recherche explore la variation dans les risques d'exposition à la COVID-19 selon les caractéristiques des travailleurs en se basant sur des données publiques canadiennes combinées à une base de données fournissant de l'information sur le niveau de proximité physique et la fréquence d'exposition à des infections ou maladie auxquels font face les

personnes occupant différentes professions. Les résultats démontrent d'importantes différences entre catégories sociodémographiques. Premièrement, les femmes travaillent dans des professions associées à des niveaux moyens de risques d'exposition à la COVID-19 significativement plus élevés que les hommes, qui s'explique en partie par leur surreprésentation dans de grandes catégories professionnelles à haut niveau de risque tel que les professions du secteur de la santé. Deuxièmement, les travailleurs âgés (65 ans et plus), un groupe vulnérable à la COVID-19, semblent travailler dans des professions demandant d'effectuer des tâches menant à un niveau plus faible de proximité physique que leurs plus jeunes collègues, alors que les différences d'exposition à des maladies ou infections sont limitées. Finalement, les personnes travaillant dans des professions à faible revenu tendent également à travailler dans des professions plus à risque d'exposition à la COVID-19 que les autres travailleurs, ce qui est particulièrement le cas pour les femmes, les immigrants et les personnes membres minorités visibles travaillant dans des professions à faible revenu. De manière plus générale, cette note de recherche explore les implications en matière de santé de la littérature sur les tâches professionnelles et la stratification du marché du travail.

- **Mots clés**: COVID-19, santé, âges, genre, marché du travail, vulnérabilité, Canada.

Syed, Fatima. 2021. "“You Can’t Stop the Spread of the Virus if You Don’t Stop it in Peel”." *The Local: An independent magazine exploring urban health and social issues in Toronto*, 2021-04-22. <https://thelocal.to/you-cant-stop-the-spread-of-the-virus-if-you-dont-stop-it-in-peel/>.

- **Abstract**

« Not enough support, not enough testing, not enough vaccines—Peel has been neglected at every step of the pandemic, and the results have been devastating (...) There are so many reasons Peel has been so hard hit by the pandemic. The region is a complex cacophony of communities that has not been adequately assisted by the province’s one-size-fits-all pandemic response. Peel has been the fastest growing region in Ontario for decades, with the most underfunded health care system in the province: there is only one hospital in Brampton to serve over 600,000 people. It’s home to the province’s largest number of international students, new immigrants, and workers in distribution centres. Many of these people live in multigenerational homes, not just because it’s a feature of their culture, but because of their inability to afford housing and child-care while working paycheque to paycheque (...) The article examines how the region's public health office responded to the pandemic and includes interviews with other local key informants and residents, workers, to gain a deeper understanding of the pandemic's impacts in Peel Region. »

- **Keywords**: Pandemic, Peel, Ontario, migrants, public health, COVID-19

TCFtv La télévision communautaire de Montréal. 2021. *Montréal-Nord demeure l'un des endroits les plus touchés par la Covid-19*. <https://youtu.be/ggJlk6VbxAo>

- **Descriptive**

Montréal-Nord est l'un des arrondissements les plus denses en population de la province. À l'arrivée de la crise sanitaire, le milieu de vie faisait partie des lieux les plus touchés par la Covid-19 au Québec. En effet, une grande partie de sa population est composée de travailleurs essentiels et plusieurs d'entre eux partagent de petits logements. Aujourd'hui, il s'agit encore d'un important foyer d'éclosion sur l'île. Le quartier riche en diversité culturelle fait aussi face à de nombreux enjeux sociaux économiques de taille en parallèle avec ceux de la crise sanitaire. On y trouve d'ailleurs la population de personnes âgées la plus affectée par la pauvreté de la province. Chantal Rossi, Conseillère de la ville de Montréal-Nord souligne les efforts et l'aide apportés par la ville auprès de sa population durant la dernière année.

- **Mots clés** : COVID-19, Montréal-Nord, travailleurs essentiels, pandémie, éclosions.

Turcotte, Martin, and Katherine Savage. 2020. *The contribution of immigrants and population groups designated as visible minorities to nurse aide, orderly and patient service associate occupations*. Ottawa: Statistics Canada. https://publications.gc.ca/collections/collection_2020/statcan/45-28/CS45-28-1-2020-32-eng.pdf.

- **Abstract**

“In the current context of the COVID-19 pandemic, there is a growing need for additional information on the population groups that are more likely to be negatively affected by the pandemic in Canada, such as immigrants and population groups designated as visible minorities. One of the issues immigrants and visible minority groups have been facing since the start of the pandemic is that many of them are essential workers, which puts them at higher risk of contracting COVID-19. In particular, nurse aides, orderlies and patient service associates were at higher risk of contracting COVID-19, especially those working in long-term care facilities in Quebec and Ontario. A number of workers in these occupations contracted the virus, which was an additional risk factor for their families and communities. To better understand how different subgroups of workers were exposed to the risks associated with COVID-19, this article provides a profile of nurse aides, orderlies, and patient service associates. In particular, using data from the Census of Population, we look at the importance of immigrants and population groups designated as visible minorities in these essential occupations. The *Employment Equity Act* defines visible minorities as “persons, other than Aboriginal peoples, who are non-Caucasian in race or non-white in colour.” They include the following groups: South Asian, Chinese, Black, Filipino, Latin American, Arab, Southeast Asian, West Asian, Korean, and Japanese.”

- **Keywords**: COVID-19, essential workers, nurses' aides, health, high-risk population, immigrants, visible minorities, Canada.

Turcotte, Martin, et Katherine Savage. 2020. *La contribution des immigrants et des groupes de population désignés comme minorités visibles aux professions d'aide-infirmier, d'aide-soignant et de préposé aux bénéficiaires*. Ottawa: Statistique Canada.

https://publications.gc.ca/collections/collection_2020/statcan/45-28/CS45-28-1-2020-32-fra.pdf.

- **Résumé**

« Dans le contexte de la pandémie de COVID-19, il existe actuellement un besoin grandissant de renseignements supplémentaires au sujet des groupes de populations qui sont plus susceptibles de subir les effets négatifs de la pandémie au Canada, comme les immigrants et les différents groupes de population désignés comme minorités visibles. L'un des enjeux auxquels les immigrants et les groupes de minorités visibles font face depuis le début de la pandémie est le fait que plusieurs d'entre eux travaillent dans des professions essentielles, ce qui les rend plus à risque de contracter la COVID-19. Plus précisément, les aides-infirmiers, les aides-soignants et les préposés aux bénéficiaires ont été exposés à des risques plus élevés de contracter la COVID-19, particulièrement parmi ceux qui œuvrent dans les établissements de soins de longue durée du Québec et de l'Ontario. Plusieurs travailleurs de ces professions ont eux-mêmes contracté le virus, ce qui a constitué un facteur de risque supplémentaire pour leurs familles et leurs communautés. Afin de mieux comprendre de quelle façon différents sous-groupes de travailleurs ont été exposés aux risques associés à la COVID-19, le présent article présente un profil des aides-infirmiers, des aides-soignants et des préposés aux bénéficiaires. On examine plus particulièrement, au moyen des données du Recensement de la population, l'importance des immigrants et des divers groupes de population désignés comme minorités visibles dans ce groupe de professions essentielles. Selon la Loi sur l'équité en matière d'emploi, on entend par minorités visibles « les personnes, autres que les Autochtones, qui ne sont pas de race blanche ou qui n'ont pas la peau blanche ». Il s'agit principalement des groupes suivants : Sud-Asiatique, Chinois, Noir, Philippin, Latino-Américain, Arabe, Asiatique du Sud-Est, Asiatique occidental, Coréen et Japonais. »

Conditions de logement, vie domestique, vie quotidienne / Housing conditions, domestic and everyday life

Fondation Abbé Pierre, and FEANTSA. 2021. *Sixth Overview of Housing Exclusion in Europe*. Brussels & Paris: FEANTSA and the Abbé Pierre Foundation.
https://www.fondation-abbe-pierre.fr/documents/pdf/rapport_europe_2021_gb.pdf.

- **Abstract**

Young people are most likely to experience housing exclusion as a result of the pandemic. The continued increase in rents in strained housing markets and the disappearance of industries young people work in have prevented them from securing a decent income. As the pandemic continues, their situation further deteriorated with their housing situation becoming insecure. A rapidly increasing part of the young population is no longer able to afford rent, and some are even struggling to pay for food. Many young people have no other choice than to move back in with their parents, when this is an available option for them. European youth

is at serious risk. The 6th Overview of Housing Exclusion in Europe focuses on young people's living conditions and calls on the European Union and Member States to intervene immediately to secure their future. Stemming the rising poverty tide is more urgent than ever. The current pandemic will produce more poverty and homelessness if no drastic measures are taken.

- **Keywords:** COVID-19, Europe, youth, housing, unemployment, homelessness.

Fondation Abbé Pierre, et FEANTSA. 2021. *6e Regard sur le Mal-Logement en Europe 2021*. Bruxelles et Paris : Fondation Abbé Pierre et FEANTSA.

https://www.feantsa.org/public/user/rapport_europe_2021_fr.pdf

- **Résumé**

Alors que les loyers sont en constante augmentation depuis des années et que le chômage est en hausse, les 18-30 ans sont les premières victimes des conséquences économiques et sociales de la crise du COVID 19, qui a entraîné une dégradation de leurs conditions de vie et représente un désastre pour leur accès aux droits et à l'autonomie. Recours à l'aide alimentaire, retour contraint chez les parents – quand ils le peuvent -, difficultés financières... La jeunesse européenne est en danger. Dans cette 6e édition du Regard sur le Mal-Logement en Europe, la Fondation Abbé Pierre et la FEANTSA font la lumière sur les conditions de vie des jeunes européens et alerte l'Union européenne et les États membres sur l'urgence d'agir pour leur avenir. Le rapport fait également le point sur la situation des plus démunis en Europe et sur la vague de pauvreté qui risque de s'abattre sur le continent si rien n'est fait à temps pour l'endiguer.

- **Mots clés :** COVID-19, Europe, jeunes, logement, chômage, itinérance.

Ghosh, Sutama. 2021. *COVID-19: Challenges and Resilience of International Students: A Case Study of Greater Sudbury in Northern Ontario*. Toronto: York University, Building Migrant Resilience in Cities Partnership (BMRC Research Digests). <https://bmrc-irmu.info.yorku.ca/files/2021/10/Sutama-RD-English-1-Final.pdf?x15611>.

- **Abstract**

The ongoing COVID-19 pandemic is causing unique vulnerabilities among international students in many Canadian cities. They face barriers in procuring the necessities of life, such as housing and employment, and feeling socially isolated. Those providing support to international students, i.e., educational institutions, and community organizations, are also facing unique obstacles. In addition to documenting the struggles of international students and institutions during COVID-19 we investigate how they manage and overcome those struggles.

Results: International students depended on their social networks outside the city during COVID-19 with a majority moving in with friends and family in the GTHA and even Montreal. Despite living with relatives and friends, most students had to take low-paying essential jobs to make ends meet, risking their physical and mental health. During COVID-19, international students in Sudbury had limited and inconsistent institutional support,

especially from educational institutions. As a result, their financial precarity increased, many were confined in undesirable housing, and stress, anxiety, and isolation rose. On a larger scale, the local institutions took no distinct measures to overcome specific challenges institutions faced in assisting international students during the pandemic. Due to lack of government and private funding, the local institutions in Greater Sudbury found it extremely challenging to provide any service to international students. They were also unable to systematically evaluate international students' needs.

- **Keywords:** COVID-19, International student, Greater Sudbury, challenges, resilience.

Kern, Leslie. 2020. "Care Work in the Time of COVID-19." 2020-05-19. <https://www.versobooks.com/blogs/4698-care-work-in-the-time-of-covid-19>.

- **Abstract**

Leslie Kern discusses the care work and feminized labor that keeps cities running, asking: once the global pandemic subsides, will care work be forced back into obscurity, or will we work to re-organize our cities in ways that support, value, and redistribute care more equitably?

- **Keywords:** COVID-19, women's work, cities

Maalsen, Sophia, Dallas Rogers, and Leo Patterson Ross. 2020. "Rent and crisis: Old housing problems require a new state of exception in Australia." *Dialogues in Human Geography* 10 (2):225-229. doi: 10.1177/2043820620933849.

- **Abstract**

The coronavirus pandemic is opening up a space for housing advocates and scholars to push for reforms to the private rental sector. Yet, we argue the Australian government has shown little commitment to addressing long-term, structural housing issues. Temporary reform will not lead to a new or more socially just housing system in the long-term—a new housing normal—without a significant and nation-wide tenant campaign. Like others, we are working together on campaigns such as this, but we are conscious that the government is likely to revert back to their old housing habits.

- **Keywords:** Australia, COVID-19, housing crisis, rental, state of exception.

Rabiah-Mohammed, Fawziah, Leah K. Hamilton, Abe Oudshoorn, Mohammad Bakhsh, Rima Tarraf, Eman Arnout, Cindy Brown, Sarah Benbow, Sagida Elnihu, Mohammed El Hazzouri, Victoria M. Esses, and Luc Theriault. 2022. "Syrian Refugees' Experiences of Housing Stability during the COVID-19 Pandemic: Barriers to Integration and Just Solutions." *Studies in Social Justice* 16 (1):9-32.

- **Abstract:**

Research has shown high levels of housing precarity among government-assisted refugees (GARs) connected to difficult housing markets, limited social benefits, and other social

and structural barriers to positive settlement (Lumley-Sapanski, 2021). The COVID-19 pandemic has likely exacerbated this precarity. Research to date demonstrates the negative consequences of the COVID-19 pandemic for refugees and low-income households, including both health-related issues and economic challenges, that may exacerbate their ability to obtain affordable, suitable housing (Jones & Grigsby-Toussaint, 2020; Shields & Alrob, 2020). In this context, we examined Syrian government-assisted refugees' experiences during the pandemic, asking: how the COVID-19 pandemic has impacted Syrian refugees' experiences of housing stability. To examine this issue, we interviewed 38 families in Calgary, London, and Fredericton. Using a qualitative descriptive methodology for analysis and interpretation (Thorne et al., 1997), we found the liminality of settling as a GAR has been compounded by isolation, further economic loss, and new anxieties during the pandemic. Ultimately, for many participants, the pandemic has thwarted their housing stability goals and decreased their likelihood of improving their housing conditions. Based on our findings, we discuss potential policy and practice relevant solutions to the challenges faced by refugees in Canada during the pandemic and likely beyond.

- **Keywords:** COVID-19 pandemic; government-assisted refugees; Syrian refugees; housing instability; social inequities; policy recommendations

Parker, Brenda, and Janet Smith. 2021. *Women's Housing Precarity During and Beyond COVID-19*. University of Illinois System: Institute of Government and Public Affairs (Task Force on the Impact of the COVID-19 Pandemic). https://igpa.uillinois.edu/sites/igpa.uillinois.edu/files/reports/PolicySpotlight_HousingInstability_Final.pdf.

- **Abstract**
COVID-19 has amplified gendered disparities in caregiving, work, and housing in the United States. This Policy Spotlight brings together the latest research and data to discuss the intersection of these disparities with regard to the anticipated eviction crisis in Illinois. Housing insecurity and potential evictions will affect thousands of Illinois single-parent households, most of whom are female-headed, and disproportionately Black and Latino.¹ This will likely lead to a sustained crisis of financial, health, and housing fluctuation, and set back historic gains in women's equality. The recent \$1.9 trillion American Rescue Plan that was signed into law in March 2021 is an important step in the right direction, as are the federal moratorium extension and federal endeavors. However, there are challenges with getting assistance to where it is needed. There is a need for both wise allocation of these resources and the infusion of additional interventions to stave off the devastating effects of eviction. Upstream approaches must be put in place now, especially because landlords are filing actions in court despite the moratorium.

- **Keywords:** Covid-19, Women's housing, health, precarity

Parker, Brenda, and Catherine Levin-Reid. *Pandemic precarity and everyday disparity: gendered housing needs in North America* Housing and Society, DOI: 10.1080/08882746.2021.1922044. <https://doi.org/10.1080/08882746.2021.1922044>

- **Abstract**

We identify key issues for housing researchers, practitioners, and advocates working in the United States and Canada to consider, both during the COVID-19 pandemic and far beyond. First, we draw upon feminist and intersectional literatures on gendered inequalities and social structures, which provide the often forgotten or overlooked context for women's experiences in housing. This includes the broader insight that too frequently, women have not been involved in shaping the policy and planning climate around housing, even as they disproportionately are affected by them. Second, we describe women's housing-related precarity and some of its implications, grounding this research in a political economic critique of the way that housing and resources are allocated and the neoliberal climate that values profit over people and that has induced instability for many women in so many communities. We conclude by offering examples of organizations and initiatives that work to address the disparities identified herein. Throughout the paper, we emphasize the need for intersectional and interdisciplinary collaborations (for example, among queer, anti-racist, feminist, political economic, and other scholars) that engage with complexity and orient toward equity and justice.

- **Keywords:** Housing; Gender; Women; Precarity; Covid-19

Reiser, Chloé. 2021. "Se loger dans un quartier tremplin : Trajectoires et stratégies résidentielles des familles immigrantes à Parc-Extension et à Montréal." PhD thesis, Université de Montréal et Université de Paris. <https://hal.archives-ouvertes.fr/tel-03319148>.

- **Résumé**

Cette recherche de géographie urbaine et sociale porte sur les trajectoires et les stratégies résidentielles des familles immigrantes à Saint-Michel et Parc-Extension, deux *inner suburbs* d'immigration de Montréal. S'ils sont encore désignés par les chercheurs·se·s comme des espaces tremplins, les deux quartiers ne semblent plus favoriser la mobilité sociale et spatiale des nouveaux et nouvelles arrivant·e·s. Alors que la plupart des locataires à faible revenu vivent des situations de logement précaires dans le secteur privé, quelques familles immigrantes parviennent à accéder au secteur social. Comment expliquer la stabilisation résidentielle des familles immigrantes à Parc-Extension et Saint-Michel et l'accès au logement social d'une minorité au sein de ces quartiers tremplins ? Si l'on a tendance à envisager les familles immigrantes comme des individus multi-déterminés sur le marché du logement, ces dernières sont pourtant capables d'arbitrer. L'idée est de redonner une certaine capacité d'agir aux familles en insistant sur leur intentionnalité dans la recherche et dans les choix successifs de logement, tout en montrant comment ces stratégies résidentielles sont conditionnées par des barrières spécifiques, liées notamment

à leur identité immigrante. À cet effet, j'articule différentes méthodes qualitatives. Menés auprès de 61 familles immigrantes, les entretiens semidirectifs complétés par la démarche de photographie participative constituent le socle de l'analyse. Si j'utilise les extraits d'entretien et les photos pour comprendre la complexité des arbitrages résidentiels et du processus de recherche de logement, le travail systématique d'encodage des entretiens me permet de reconstituer les trajectoires des ménages sur le temps long depuis leur arrivée à Montréal. La trentaine d'entretiens semi-directifs menés auprès des bailleurs sociaux, des élu·e·s et des urbanistes, ainsi que l'observation participante conduite comme bénévole au sein d'un organisme communautaire dans chacun des quartiers apportent un point de vue extérieur sur les structures qui s'imposent aux familles. Loin de faire leurs choix simplement en fonction de leur identité immigrante, la plupart des familles élisent leur logement et leur quartier en tant que parents, les enfants étant placés au cœur des stratégies résidentielles. Cependant, la structure de l'offre résidentielle, les problèmes de diffusion de l'information ou encore les discriminations des propriétaires et des institutions provoquent un tri social où les ménages immigrants les plus insérés parviennent à obtenir des logements abordables de bonne qualité, tandis que les familles les plus vulnérables sur le plan économique, social et culturel sont reléguées au parc social de fait. Les transformations en cours dans les deux quartiers viennent affecter les projets des familles interrogées et renforcer leur précarité résidentielle. Alors que j'interroge le maintien à terme de la fonction tremplin à Saint-Michel et Parc-Extension, les organismes de défense des droits des locataires s'organisent pour tenter de combler l'inaction des pouvoirs publics. En adoptant une position théorique et méthodologique intermédiaire au sein des études sur les trajectoires résidentielles, cette thèse propose d'ouvrir de nouvelles perspectives de recherche sur les recompositions urbaines et les mobilités résidentielles à l'œuvre dans les quartiers tremplins des grandes métropoles canadiennes.

- **Mots clés :** Logement, immigration, familles, trajectoires, stratégies, marchés locaux de l'habitat, politiques de logement, quartier tremplin, Montréal.

- **Abstract**

This research in urban and social geography investigates the residential trajectories and strategies of immigrant families in Saint-Michel and Parc-Extension, two inner suburbs of immigration in Montreal. While researchers still refer to them as transitional spaces, these two neighborhoods no longer seem to foster the social and spatial mobility of newcomers. Whereas most low-income tenants live in precarious housing situations in the private sector, a handful of immigrant families manage to access the social sector. How can we explain the residential stabilization of immigrant families in Parc-Extension and Saint-Michel and the access to social housing of a minority within these transitional neighborhoods? If there is a tendency to view immigrant families as multi-determined individuals in the housing market, they are still capable of decision-making. The idea is to give back a certain ability to act to families by insisting on the intentionality in their search and successive housing choices, while showing how these residential strategies are affected by specific barriers, notably related to their immigrant identity. To do so, I combine several

qualitative survey techniques. Semi-directive interviews and a participatory photography project with 61 immigrant families form the basis of this analysis. If I use the interview transcripts and the photographs to understand the complexity of the residential choices and the housing search process, the systematic work of encoding the interviews helps me to reconstruct the long-term trajectories of the households since their arrival in Montreal. The thirty or so semi-directive interviews conducted with social landlords, elected officials and urban planners, as well as the participant observation carried out as a volunteer within a community organization in each neighborhood, provide an outside perspective on the structures which prevail over these immigrant families. Far from simply making choices on the basis of their immigrant identity, most families select their homes and neighborhoods as parents, the children being at the heart of their residential strategies. However, the structure of the housing supply, information dissemination issues or discriminatory practices by landlords and institutions lead to a social stratification in which the most integrated immigrant households manage to obtain good quality and affordable accommodation, while the most economically, socially and culturally vulnerable families are relegated to the de facto social stock. The ongoing changes in the two neighborhoods affect the projects of the interviewed families and increase their residential insecurity. While I am questioning the long-term continuation of the gateway function in Saint-Michel and Parc-Extension, tenant rights organizations try to compensate for the inaction of public authorities. With a theoretical and methodological intermediate position within studies on residential trajectories, this thesis aims to open up new research perspectives on urban restructuring and residential mobility at work in the transitional neighborhoods of major Canadian cities.

- **Keywords:** Housing, Immigration, Family, Trajectory, Strategy, Local housing markets, Housing policies, Transitional neighborhood, Montreal

Talbot, Geneviève, and Carole Yerochewski. 2021. "Pandémie : les logiques inégalitaires du confinement." *Nouveaux Cahiers du socialisme* (25):18-25.

- **Résumé**

Si nous sommes toutes et tous égaux face au virus de la COVID-19, nous ne le sommes pas quant à sa transition et aux impacts de la situation sanitaire. Dans ce chapitre, les autrices exposent trois types d'iniquités à l'échelle internationale. Quand la pandémie est devenue incontrôlable et le monde est passé au mode en ligne, beaucoup d'employés se sont retrouvés à la porte dont les travailleurs informels. Ses personnes sans assurance et sans situation économique font parties des grands oubliés de la pandémie. Des pays ont essayé de leur venir en aide, mais leur situation est beaucoup plus complexe que des fonds pour faire des courses. D'autre part, nous trouvons aussi les migrants qui se sont retrouvés dans des situations plus dangereuses. En effet, l'économie mondiale est loin d'être la seule victime de la fermeture des frontières, la situation des migrants était beaucoup plus inquiétante. Les familles et les jeunes se sont retrouvés dans en détresse à un point où la

migration clandestine (ex : franchir la méditerranée...) était la seule solution envisageable pour protéger leurs familles et survivre eux-mêmes. L'arrivée du vaccin a donné plus de sens au mot « prioritaire ». L'âge et la fonction ont déterminé les premiers groupes à sauver, ceux qui étaient aux premiers rangs où il y avait le plus de morts parmi eux. Après des discours pleins d'universalité et de solidarité internationale, les pays du Sud étaient des spectateurs qui attendaient leurs tours quand les pays européens et de l'Amérique du Nord se faisaient protéger contre les différentes variantes de la COVID-19.

- **Mots clés:** COVID-19, pandémie, iniquité, travailleurs informels, migrants, Nord, Sud.

Whitzman, Carolyn. 2020. *COVID Housing Policy Roundtable Report*. Vancouver: University of British Columbia, Housing Research Collaborative. https://housingresearchcollaborative.scarp.ubc.ca/files/2020/11/FinalReport_COVID-19-Global-Housing-Policies.pdf.

- **Abstract**

« The purpose of this policy scan is to amplify potential “good practice” in relation to housing policy that has emerged since COVID-19 became a global pandemic in March 2020(...) There are three priorities for housing policies during COVID-19: 1. Dampen the spread of COVID-19 based on the latest available science; 2. Improve the likelihood of health outcomes for those most marginalised, whether or not they have COVID-19; 3. Improve long-term conditions for those most marginalized by generating adequate housing (...) This report and accompanying database are the result of two sets of three roundtables each in September and October 2020 (...) We brought together housing researchers and advocates from across Canada, as well as 10 other countries on all inhabited continents. Initial roundtables helped determine the parameters and purpose of the database, while the second set of roundtables added case studies and new perspectives. »

- **Keywords:** COVID-19, pandemic, housing, marginalized population, Canada.

Yang, Fei-Ju, and Nicole Aitken. 2021. *People living in apartments and larger households were at higher risk of dying from COVID-19 during the first wave of the pandemic*. Ottawa: Statistique Canada. https://publications.gc.ca/collections/collection_2021/statcan/45-28/CS45-28-1-2021-13-eng.pdf

- **Abstract**

In Canada, social distancing measures were implemented in public spaces starting mid-March 2020 because COVID-19 is spread when an infected person comes in close contact with others (World Health Organization, 2020). However, social distancing can be a challenge for individuals sharing a home, especially if the space is small or there are many people living in the same space (Moos, McCulley, and Vinodrai, 2020). According to Schellenberg and Fonberg (2020), smaller residential units tend to have fewer bedrooms and living space, which can hinder the ability to practice social distancing when a family

member has had contact with someone with COVID-19 or tested positive for the virus. Additionally, having many people living in a small residential unit will increase the number of potential opportunities for COVID-19 transmission. Vulnerable populations, such as Indigenous populations or new immigrants, can be disproportionately affected by COVID-19 transmission as they are more likely to live in crowded housing (Statistics Canada, 2017a; Haan, 2012). Taken together, international studies have shown that both household size and housing characteristics matter for COVID-19 transmission and COVID-19 mortality, and it can have greater impact on vulnerable populations (Borjas, 2020; Joy et al., 2020; Moos et al., 2000). This study uses the provisional data from the Vital Statistics—Death Database linked to the 2016 short-form Census to explore differences in the rate of mortality attributed to COVID-19 by the type of private dwelling where a person lived and the size of their household at the time of the 2016 Census. Although many of the deaths attributed to COVID-19 in the first wave of the pandemic – from March to July - occurred in long-term care homes, this article is focused on deaths associated with people living in private homes, which represents approximately 98% of the general population. The results of this article are based on deaths attributable to COVID-19 occurring between January 1st and July 4th. Details regarding the limitations of this data can be found in the data source section at the end of the article, including the lack of information on other potentially influential socio-economic factors relevant to COVID-19.

- **Keywords:** COVID-19, health crisis, physical distancing, housing, vulnerable populations, Canada.

Yang, Fei-Ju, et Nicole Aitken. 2021. *Les personnes qui vivaient en appartement ou au sein d'un ménage plus nombreux étaient plus à risque de mourir de la COVID-19 au cours de la première vague de la pandémie.* Ottawa: Statistique Canada. <https://www150.statcan.gc.ca/n1/pub/45-28-0001/2021001/article/00004-fra.pdf>.

- **Résumé**

Au Canada, des mesures de distanciation physique ont été mises en œuvre dans les endroits publics à partir de la mi-mars 2020, dans le but de ralentir la propagation de la COVID-19, laquelle se transmet quand une personne infectée est en contact étroit avec d'autres personnes (Organisation mondiale de la Santé, 2020). Cependant, il peut être difficile pour les personnes qui partagent un logement de maintenir une certaine distance entre elles-mêmes et les autres, surtout si l'espace est restreint ou si plusieurs personnes vivent au même endroit (Moos, McCulley, et Vinodrai, 2020). Selon Schellenberg et Fonberg (2020), les unités résidentielles de plus petite taille ont tendance à avoir un moins grand nombre de chambres et une plus petite superficie habitable, de sorte qu'il peut être difficile de rester au domicile ou de respecter les mesures de distanciation physique lorsqu'un membre de la famille a eu des contacts avec une personne atteinte de la COVID-19 ou a obtenu un résultat positif à un test de dépistage. De plus, si plusieurs personnes vivent ensemble dans une unité d'habitation, cela augmentera le nombre d'occasions potentielles de transmission de la COVID-19 au sein du ménage. Les populations vulnérables, comme les Autochtones et les nouveaux immigrants, peuvent être touchées de façon

disproportionnée par le risque de transmission de la COVID-19, car elles sont plus susceptibles de vivre dans des logements surpeuplés (Statistique Canada, 2017a; Haan, 2012). Selon les études internationales, la taille du ménage et les caractéristiques du logement sont d'importants facteurs pour la transmission de la COVID-19 et la mortalité attribuable à la COVID-19, et qu'elles peuvent avoir des répercussions plus importantes sur les populations vulnérables (Borjas, 2020; Joy et coll., 2020; Moos et coll., 2000). La présente étude se fonde sur les données provisoires de la Base canadienne de données de l'état civil – Décès, couplées aux données du questionnaire abrégé du Recensement de 2016 pour étudier les différences dans le taux de mortalité attribué à la COVID-19 par le type de logement privé où vivait une personne et la taille de son ménage au moment du Recensement de 2016. Bien que grande nombre des décès attribués à la COVID-19 lors de la première vague de la pandémie, soit de mars à juillet, se soient produits dans des foyers de soins de longue durée, le présent article porte sur les décès associés aux personnes vivant dans un logement privé, lesquelles représentent environ 98 % de la population générale. Les résultats présentés dans cet article sont fondés sur les décès attribuables à la COVID-19 survenus entre le 1^{er} janvier et le 4 juillet. Les détails sur les limites de ces données se trouvent dans la section de la source de données à la fin de l'article, y compris l'absence de renseignements sur d'autres facteurs socioéconomiques pouvant être déterminants pour la COVID-19.

- **Mots clés**: COVID-19, crise sanitaire, distanciation physique, logement, populations vulnérables, Canada

Zossou, Clémence. 2021. *Sharing household tasks: teaming up during the COVID-19 pandemic*. Ottawa: Statistique Canada (No au catalogue 45280001). https://publications.gc.ca/collections/collection_2021/statcan/45-28/CS45-28-1-2021-6-eng.pdf

- **Abstract**

Lockdowns were put in place at the beginning of the pandemic to slow the spread of COVID-19. For Canadian families, this meant telework, school and daycare closures, online classes, and cancelled extracurricular activities. In addition, outings were limited. Households. How couples shared household tasks during these unprecedented times is therefore worth examining. Before the pandemic, and regardless of employment status, women spent more time than men doing household tasks and more often adjusted their schedule to meet the needs of their family. This analysis shows how couples in Canada shared household tasks in the early months of the pandemic. It looks at the differences between women and men in how these tasks were shared and the level of satisfaction with their allocation. The impact of having children in the household or not, and of the significant increase in telework, is also examined. This article is based on data from the third wave of the Canadian Perspectives Survey Series, which took place from June 15 to 21, 2020. Since the beginning of the pandemic, Statistics Canada has been conducting this series of surveys, which is statistically representative of the Canadian population. This

specific survey dealt with, among other topics, the distribution of household tasks among couples living together.

- **Keywords:** COVID-19, pandemic, lockdown, housing, family, couple, Canada.

Zossou, Clémence. 2021. *Partage des tâches domestiques : faire équipe pendant la pandémie de COVID-19*. Ottawa: Statistique Canada (No au catalogue 45280001). <https://www150.statcan.gc.ca/n1/pub/45-28-0001/2020001/article/00081-fra.pdf>.

- **Résumé**

Le confinement à la maison a été mis en place au début de la pandémie pour ralentir la propagation de la COVID-19. Pour les familles canadiennes, cela se traduisait par le télétravail, la fermeture des écoles et des garderies, l'école à distance et l'annulation des activités parascolaires. De plus, les sorties étaient limitées. Ces mesures, qui ont eu une incidence sur les familles canadiennes tout au long de la pandémie, ont aussi modifié la dynamique au sein des ménages. La façon dont les couples ont partagé les tâches domestiques en cette période sans précédente mérite alors d'être étudiée. La présente analyse montre la façon dont les couples au Canada ont partagé les tâches domestiques au cours des premiers mois de la pandémie. On aborde les différences entre les femmes et les hommes quant à la répartition des tâches domestiques et le degré de satisfaction à l'égard de l'attribution de ces tâches. On examine aussi l'incidence de la présence ou non d'enfants dans le ménage et de l'augmentation significative du télétravail. Le présent article se fonde sur les données de la troisième vague de la Série d'enquêtes sur les perspectives canadiennes, qui s'est déroulée du 15 au 21 juin 2020. Depuis le début de la pandémie, Statistique Canada mène cette série d'enquêtes, qui est statistiquement représentative de la population canadienne. Cette fois-ci, l'enquête portait, entre autres, sur la répartition des tâches domestiques chez les couples vivant ensemble.

- **Mots clés:** COVID-19, pandémie, confinement, logement/maison, famille, couple, Canada.

Réponses au niveau des quartiers / Neighbourhood-level responses

den Broeder, Lea, Jane South, Auke Rothoff, Anne-Marie Bagnall, Firoez Azarhoosh, Gina van der Linden, Meena Bharadwa, and Annemarie Wagemakers. 2021. "Community engagement in deprived neighbourhoods during the COVID-19 crisis: perspectives for more resilient and healthier communities." *Health Promotion International*. doi: 10.1093/heapro/daab098.

- **Abstract**

The current COVID-19 pandemic confines people to their homes, disrupting the fragile social fabric of deprived neighborhoods and citizens' participation options. In deprived neighborhoods, community engagement is central in building community resilience, an important resource for health and a prerequisite for effective health promotion programs. It provides access to vulnerable groups and helps understand experiences, assets, needs and problems of citizens. Most importantly, community activities, including social support,

primary care or improving urban space, enhance health through empowerment, strengthened social networks, mutual respect and providing a sense of purpose and meaning. In the context of inequalities associated with COVID-19, these aspects are crucial for citizens of deprived neighborhoods who often feel their needs and priorities are ignored. In this perspectives paper, illustrated by a varied overview of community actions in the UK and The Netherlands, we demonstrate how citizens, communities and organizations may build resilience and community power. Based on in-depth discussion among the authors we distilled six features of community actions: increase in mutual aid and neighborhood ties, the central role of community-based organizations (CBOs), changing patterns of volunteering, use of digital media and health promotion opportunities. We argue that in order to enable and sustain resilient and confident, ‘disaster-proof’, communities, areas which merit investment include supporting active citizens, new (digital) ways of community engagement, transforming formal organizations, alignment with the (local) context and applying knowledge in the field of health promotion in new ways, focusing on learning and co-creation with citizen initiatives.

- **Keywords:** community resilience, health promotion, community engagement, COVID-19.

Depri, Danielle Kouhio, Magalie Benoit, Geneviève Grenier, et Alix Adrien. 2021. *Améliorer la réponse à la pandémie de COVID-19 pour les populations immigrantes et racisées à Montréal : consultation des acteurs terrain. Rapport final.* Montréal: Direction régionale de santé publique du CIUSSS du Centre-Sud-de-l’Île-de-Montréal. <https://rechercheiussnm.ca/ameliorer-la-reponse-a-la-pandemie-de-covid-19-pour-les-populations-racisees-et-immigrantes-a-montreal-consultation-des-acteurs-terrain/>.

- **Résumé**

Printemps 2020 : la pandémie de COVID-19 frappe le Québec et Montréal. Rapidement, on constate que le virus semble frapper certains territoires plus fort que d’autres et que leurs habitants ont besoin d’un soutien pour passer au travers de la crise. À cet effet, durant l’été 2020, la Direction régionale de santé publique de Montréal, le Centre de recherche et de partage des savoirs InterActions et l’Institut universitaire Sherpa ont joint leurs forces pour déployer un sondage auprès des acteurs terrain de l’ensemble du territoire de Montréal pour mieux comprendre et améliorer la réponse à la pandémie de COVID-19 pour les populations racisées et immigrantes de Montréal. De ce grand sondage sont ressorties plusieurs réponses et des recommandations pour mieux soutenir ces populations en temps de crise. De plus, les organisateurs communautaires et les acteurs terrain du Nord-de-l’île-de-Montréal voulaient un portrait de chacun des réseaux locaux de notre territoire. Pour ce faire, l’équipe a préparé des fiches spécifiques à tous nos réseaux locaux : Ahuntsic, Bordeaux-Cartierville, La Petite-Patrie, Montréal-Nord, Saint-Laurent et Villeray.

- **Mots clés:** COVID-19, pandémie, organismes communautaires, migrants, population racisés santé publique, quartiers, Montréal.

Fondations philanthropiques Canada. 2021. *La réponse communautaire à la COVID-19 à Montréal. Webinaire.* <https://youtu.be/wynxPmwGuO0> ; [https://www.dropbox.com/s/d15n1bhip3s0vgn/Sept30%20%20Webinar COVID%20Quebec.pdf?dl=0](https://www.dropbox.com/s/d15n1bhip3s0vgn/Sept30%20%20Webinar%20COVID%20Quebec.pdf?dl=0).

- **Abstract**

« To this day, Montreal has been the most affected city by COVID-19 in Quebec and Canada. It is against this background that 8 Montreal boroughs and districts were supported by a consortium of foundations in order to elaborate an action to stop the spread of the virus on their territory. This webinar examines the process that led to the formulation of these action plans. The webinar presents how they are implemented by the community, municipal, and public health stakeholders. The Canadian Red Cross will also explain the role it is playing to support this initiative. »

- **Keywords:** COVID-19, neighbourhood, community organizations, municipal actions, health, Montréal

- **Résumé**

« À ce jour, Montréal a été la ville la plus affectée par la COVID-19 au Québec et au Canada. C'est dans ce contexte que huit arrondissements et quartiers montréalais ont été soutenus par un consortium de fondations pour élaborer un plan d'action visant à freiner la transmission du virus sur leur territoire. Ce webinaire se penche sur la démarche ayant permis la formulation de ces plans d'action. On y présente comment ils sont mis en œuvre par les acteurs des milieux communautaire, municipal et de la santé. La Croix-Rouge canadienne expliquera également le rôle clé qu'elle joue en soutien à cette initiative »

- **Mots clés :** COVID-19, quartiers, organismes communautaires, action municipale, santé, Montréal.

Observatoire national de la politique de la ville. 2021. *Vulnérabilité et ressources des quartiers prioritaires. Observatoire national de la politique de la ville. Rapport 2020.* Paris: Agence nationale de la cohésion des territoires. <http://agence-cohesion-territoires.gouv.fr/sites/default/files/2021-07/onpv-rapport-2020.original.pdf>.

- **Résumé**

Pour sa sixième édition, le rapport 2020 de l'Observatoire national de la politique de la ville analyse les vulnérabilités et les ressources des quartiers prioritaires de la politique de la ville (QPV). Six études ont été réalisées afin de répondre à plusieurs questions posées dans le contexte de crise liée à la Covid-19 : quel est le profil des habitants des QPV de la France métropolitaine et d'Antilles-Guyane ? Les résidents des QPV sont-ils plus exposés à la Covid-19 en raison de leurs conditions de vie et des métiers qu'ils exercent ? Disposent-ils d'un accès au numérique pour effectuer les tâches du quotidien ? Quelles sont les ressources mobilisées par ces habitants pour faire face aux difficultés ? La seconde partie du rapport est constituée de courtes analyses sous forme de vingt-quatre fiches synthétiques. Certaines constituent une mise à jour des données produites dans les précédents rapports annuels sur les thèmes usuels de la politique de la ville (scolarisation,

pauvreté, délinquance, renouvellement urbain, emploi et chômage). De nouveaux thèmes sont traités grâce à la collaboration renforcée avec de nombreux partenaires. Ces contributions complètent la connaissance des 1 514 QPV qui sont, par construction, des concentrations urbaines de pauvreté.

- **Mots clés:** COVID-19, France, quartiers prioritaires de la politique de la ville (QPV), pauvreté.

Rippon, Simon, Anne-Marie Bagnall, Mark Gamsu, Jane South, Joanne Trigwell, Kris Southby, Louise Warwick-Booth, Susan Coan, and Jenny Woodward. 2020. "Towards transformative resilience: community, neighbourhood and system responses during the COVID-19 pandemic." *Cities & Health*:1-4. doi: 10.1080/23748834.2020.1788321.

- **Abstract**

Issues presented by COVID-19 to community resilience are located at individual, community, and system level. In this paper, we reflect on WHO Europe propositions on what makes resilient communities and explore how communities and systems with varying capacity have responded to the pandemic by absorbing and adapting to challenges. In our research, we are seeing local responses at all three levels, which challenge current assumptions about the respective roles of citizen, local voluntary sector, and state. This paper presents opportunities and challenges to translating this reactive social movement into proactive resilience-transforming change in how local systems work in the future.

- **Keywords:** Community resilience; COVID-19; health promotion; health inequalities; public health

Infrastructures de proximité / Neighbourhood infrastructures

Enright, Theresa, and Kevin Ward. 2021. "Governing urban infrastructures under pandemic conditions: some thoughts." *Urban Geography* 42 (7):1023-1032. doi: 10.1080/02723638.2021.1893050.

- **Abstract**

Urban infrastructure has appeared as a central feature in a range of commentaries on the COVID-19 pandemic. Understanding the imprint of the pandemic on cities and the power-laden processes through which they are being rebuilt requires an attention to the politics and governance of infrastructure. In this intervention, we understand the pandemic as a moment to rethink claims over how infrastructures work and how they might be studied. We focus on three dimensions where COVID-19 has underscored the importance of infrastructure governance: as pandemic condition, as pandemic vulnerability, and as pandemic response. We argue that a strand of future academic work must be attuned to the continued importance of the governance of and by urban infrastructures in a world of cities

in which COVID-19 and its associated economic, environmental, and social implications are likely to remain pervasive.

- **Keywords:** Infrastructure; governance; COVID-19; pandemic.

Honey-Rosés, Jordi, Isabelle Anguelovski, Vincent K. Chireh, Carolyn Daher, Cecil Konijnendijk van den Bosch, Jill S. Litt, Vrushti Mawani, Michael K. McCall, Arturo Orellana, Emilia Oscilowicz, Ulises Sánchez, Maged Senbel, Xueqi Tan, Erick Villagomez, Oscar Zapata, and Mark J. Nieuwenhuijsen. 2020. "The impact of COVID-19 on public space: an early review of the emerging questions – design, perceptions and inequities." *Cities & Health*:1-17. doi: 10.1080/23748834.2020.1780074.

- **Abstract**

Restrictions on the use of public space and physical distancing have been key policy measures to reduce the transmission of COVID-19 and protect public health. At the time of writing, one half of the world's population has been asked to stay home and avoid many public places. What will be the long-term impacts of the COVID-19 pandemic on public space once the restrictions have been lifted? The depth and extent of transformation is unclear, especially as it relates to the future design, use and perceptions of public space. This article aims to highlight emerging questions at the interface of COVID-19 and city design. It is possible that the COVID-19 crisis may fundamentally change our relationship with public space. In the ensuing months and years, it will be critical to study and measure these changes in order to inform urban planning and design in a post-COVID world.

- **Keywords:** COVID-19; design; planning; public space.

Lu, Yi, Long Chen, Xueming Liu, Yuwen Yang, William C. Sullivan, Wenyan Xu, Chris Webster, and Bin Jiang. 2021. "Green spaces mitigate racial disparity of health: A higher ratio of green spaces indicates a lower racial disparity in SARS-CoV-2 infection rates in the USA." *Environment International* 152:106465. doi: <https://doi.org/10.1016/j.envint.2021.106465>.

- **Abstract**

There is striking racial disparity in the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) infection rates in the United States. We hypothesize that the disparity is significantly smaller in areas with a higher ratio of green spaces. County level data on the SARS-CoV-2 infection rates of black and white individuals in 135 of the most urbanized counties across the United States were collected. The total population in these counties is 132,350,027, comprising 40.3% of the U.S. population. The ratio of green spaces by land-cover type in each county was extracted from satellite imagery. A hierarchical regression analysis measured cross-sectional associations between racial disparity in infection rates and green spaces, after controlling for socioeconomic, demographic, pre-existing chronic disease, and built-up area factors. We found a higher ratio of green spaces at the county

level is significantly associated with a lower racial disparity in infection rates. Four types of green space have significant negative associations with the racial disparity in SARS-CoV-2 infection rates. A theoretical model with five core mechanisms and one circumstantial mechanism is presented to interpret the findings.

- **Keywords:** Racial disparity, Health disparity, SARS-CoV-2, COVID-19, Green space, Mechanism.

Mouratidis, Kostas, and Athena Yiannakou. 2022. "COVID-19 and urban planning: Built environment, health, and well-being in Greek cities before and during the pandemic." *Cities* 121:103491. doi: <https://doi.org/10.1016/j.cities.2021.103491>.

- **Abstract**

The coronavirus disease (COVID-19) pandemic has led to dramatic changes in quality of life, bringing to the forefront of the debate the question of planning and design of pandemic-resilient cities. Using quasi-longitudinal survey data (via a social media campaign) and geospatial data from Greek cities, we evaluate changes in health and well-being during COVID-19 compared to the pre-COVID-19 period, and then explore in detail how specific built environment characteristics in Athens and Thessaloniki relate to health and well-being before and during COVID-19. Results suggest that overall health, life satisfaction, happiness, personal relationships satisfaction, leisure satisfaction, satisfaction with income, and satisfaction with vacations all decreased during COVID-19, while anxiety and back pain increased during COVID-19. The role of the urban built environment in health and well-being was found to differ considerably for the COVID-19 period compared to pre-COVID-19. Proximity to large parks, proximity to numerous local facilities, lower neighborhood density, living further from the city center, and living in a larger dwelling were associated with better health and well-being outcomes during COVID-19. Urban planning and relevant policies that cities adopt should carefully focus on mitigating implications for critical issues such as the quest for sustainable urban development and city forms.

- **Keywords:** Coronavirus disease (COVID-19) pandemic, Compact city, City planning, Quality of life, Urban built environment, Subjective well-being.

Noël, Charlotte, Lucia Rodriguez-Loureiro, Christophe Vanroelen, and Sylvie Gadeyne. 2021. "Perceived Health Impact and Usage of Public Green Spaces in Brussels' Metropolitan Area During the COVID-19 Epidemic." *Frontiers in Sustainable Cities* 3. doi: 10.3389/frsc.2021.668443.

- **Abstract**

To fight the COVID-19 epidemic, many countries implemented containment measures that made physical distancing the norm and imposed restrictions on the use of public space. In countries where access to public green spaces (PGSS) was safeguarded, they were expected to partially counterbalance the negative health outcomes of these containment measures, as they offered a unique opportunity to meet others, to avoid isolation, and to move, play

and relax at a safe distance. Research on PGS use and its objective association with health during the COVID-19 epidemic is rather limited and is based on quantitative research methodologies. Such methodologies are useful to detect objective associations between PGS use and health or between COVID-19 and PGS use but fall short in explaining the observed associations. This qualitative research filled this gap by examining how PGS users perceived the health advantages of PGSs and how the use of PGSs changed during the epidemic in the Brussels-Capital Region, Belgium. In total, 23 individual face-to-face in-depth interviews were conducted in various PGSs. We found that while PGSs were initially perceived as a possible threat to health in the first period of the epidemic, they gradually became associated in users' minds with both improved physical and mental health. Although the mechanisms behind this association were also present prior to the epidemic, they became more tangible and more universal. We also found that the use of PGSs changed during the epidemic due to measures and restrictions and due to health risk perceptions. We distinguished five different health risk perception profiles in relation to COVID-19: the denier, the fatalist, the negotiator, the conformer, and the worrier. These different health risk perceptions impacted on the use of and behaviour within PGSs. This research confirms the importance of PGSs during an epidemic and may inspire further research, offer pointers to policymakers for developing and implementing strategies related to the use of PGSs during epidemics, and assist them in providing available and accessible PGSs and in designing attractive, more epidemic-proof PGSs.

- **Keywords:** COVID-19, public green space, physical health, mental health, health risk perceptions, qualitative research.

[Enjeux de construction des données / Data construction issues](#)

Blair, Alexandra, Kahiye Warsame, Harsh Naik, Walter Byrne, Abtin Parnia, and Arjumand Siddiqi. 2021. "Identifying gaps in COVID-19 health equity data reporting in Canada using a scorecard approach." *Canadian Journal of Public Health* 112 (3):352-362. doi: 10.17269/s41997-021-00496-6.

- **Abstract**

Objective: To assess health equity-oriented COVID-19 reporting across Canadian provinces and territories, using a scorecard approach.

Methods: A scan was performed of provincial and territorial reporting of five data elements (cumulative totals of tests, cases, hospitalizations, deaths, and population size) across three units of aggregation (province or territory level, health regions, and local areas), and for four vulnerable settings (long-term care and detention facilities, schools, and homeless shelters) and eight social markers (age, sex, immigration status, race/ethnicity, healthcare worker status, occupational sector, income, and education) as of December 31, 2020. Per indicator, one point was awarded if case-delimited data were released, 0.7 points if only

summary statistics were reported, and 0 if neither was provided. Results were presented using a scorecard approach.

Results: Overall, information was more complete for cases and deaths than for tests, hospitalizations, and population size denominators needed for rate estimation. Information provided on jurisdictions and their regions, overall, tended to be more available (average score of 58%, “D”) than that for equity-related indicators (average score of 17%, “F”). Only British Columbia, Alberta, and Ontario provided case-delimited data, with Ontario and Alberta providing case information for local areas. No jurisdiction reported on outcomes according to patients’ immigration status, race/ethnicity, income, or education. Though several provinces reported on cases in long-term care facilities, only Ontario and Quebec provided detailed information for detention facilities and schools, and only Ontario reported on cases within homeless shelters and across occupational sectors.

Conclusion: One year into the pandemic, socially stratified reporting for COVID-19 outcomes remains sparse in Canada. However, several “best practices” in health equity-oriented reporting were observed and set a relevant precedent for all jurisdictions to follow for these pandemic and future ones.

- **Keywords** COVID-19, Disease outbreaks, Health equity, social determinants of health, Socio-economic conditions, Canada

- **Résumé**

Objectif : Évaluer les pratiques de déclaration des données de surveillance de la COVID-19 axée sur l’équité en matière de santé dans les provinces et territoires canadiens, en utilisant une fiche de pointage.

Méthodes : Les sites web et rapports officiels des provinces et territoires ont été analysés pour identifier la présence de cinq éléments de données sur la COVID-19 (totaux cumulatifs des tests, cas, hospitalisations et décès ainsi que la taille de la population évaluée, nécessaire pour l’estimation de taux), déclarées au niveau de trois unités d’agrégation populationnelle (de la province/du territoire, des régions socio-sanitaires, et des localités/quartiers); ainsi qu’au niveau de quatre milieux à risque d’éclosions (les établissements de soins de longue durée et de détention, les écoles, et les refuges pour personnes en situation d’itinérance) et de huit marqueurs sociaux (l’âge, le sexe, le statut d’immigration, la race/ethnicité, le statut de travailleur de santé, le revenu, le niveau d’éducation, et le secteur de travail) à compter du 31 décembre 2020. Pour chaque indicateur, un point a été attribué si des données délimitées par cas ont été publiées, 0,7 points si seules les statistiques sommaires ont été communiquées, et 0 si aucune information n’a été fournie. Les résultats sont présentés sous la forme d’une fiche de pointage.

Résultats : Dans l’ensemble, les informations sur les cas et les décès étaient plus complètes que celles pour les tests, les hospitalisations et les tailles de population. Les éléments de données étaient plus disponibles au niveau global des provinces et territoires et de leurs régions socio-sanitaires (note moyenne de 58 % ou « D ») que pour les indicateurs liés à l’équité en matière de santé (note moyenne de 17 % ou « F »). Seuls la Colombie-Britannique, l’Alberta et l’Ontario ont fourni des données délimitées par cas, et seuls l’Alberta et l’Ontario ont fourni des données au niveau local. Aucune juridiction n’a fait

état de données en fonction du statut d'immigration, de la race/l'ethnicité, du revenu ou du niveau d'éducation des patients. Plusieurs juridictions ont fourni des informations au sujet des cas au sein des établissements de soins de longue durée, mais seuls l'Ontario et le Québec ont fourni des informations détaillées au sujet des établissements de détention et des écoles. L'Ontario était unique en rapportant sur les cas par secteur occupationnel et pour les refuges pour les personnes en situation d'itinérance.

Conclusion: Un an après le début de la pandémie, la disponibilité des données sur la COVID-19, stratifiées par marqueurs sociaux, reste très limitée au Canada. Cependant, plusieurs « bonnes pratiques » en matière de déclaration axée sur l'équité en matière de santé ont été observées, ce qui constitue un précédent pertinent que les juridictions pourront suivre pendant cette pandémie et celles à venir.

- **Mots-clés** COVID-19, épidémies, équité en matière de santé, déterminants sociaux de la santé, conditions socio-économiques, Canada

Choi, Kate H., Patrick Denice, Michael Haan, and Anna Zajacova. 2021. "Studying the social determinants of COVID-19 in a data vacuum." *Canadian Review of Sociology/Revue canadienne de sociologie* 58 (2):146-164. doi: <https://doi.org/10.1111/cars.12336>.

- **Abstract**

Race-based and other demographic information on COVID-19 patients is not being collected consistently across provinces in Canada. Therefore, whether the burden of COVID-19 is falling disproportionately on the shoulders of demographic groups is relatively unknown. In this article, we first provide an overview of the available geographic and demographic data related to COVID-19. We then make creative use of these existing data to fill the vacuum and identify key demographic risk factors for COVID-19 across Canada's health regions. Drawing on COVID-19 counts and tabular census data, we examine the association between communities' demographic composition and the number of COVID-19 infections. COVID-19 infections are higher in communities with larger shares of Black and low-income residents. Our approach offers a way for researchers and policymakers to use existing data to identify communities nationwide that are vulnerable to the pandemic in the absence of more detailed demographic and more granular geographic data.

- **Keywords:** COVID-19, Canada, data collection, population health, marginalized population.

- **Résumé**

Les renseignements fondés sur la race et d'autres données démographiques sur les patients atteints du COVID-19 ne sont pas recueillis de manière uniforme dans toutes les provinces du Canada. Par conséquent, si le fardeau du COVID-19 tombe de manière disproportionnée sur les épaules de groupes démographiques particuliers est relativement inconnu. Dans cet article, nous fournissons d'abord un aperçu des données géographiques et démographiques disponibles liées au COVID-19. Nous utilisons ensuite de manière créative ces données existantes pour combler le vide et identifier les principaux facteurs de risque démographiques du COVID-19 dans les régions socio-sanitaires du Canada. En nous basant sur les dénombrements de COVID-19 et les données tabulaires du recensement,

nous examinons l'association entre la composition démographique des communautés et le nombre d'infections au COVID-19. Les infections au COVID-19 sont plus élevées dans les communautés avec une plus grande proportion de résidents Noirs et à faible revenu. Notre approche offre aux chercheurs et aux décideurs un moyen d'utiliser les données existantes pour identifier les communautés à l'échelle nationale qui sont vulnérables à la pandémie en l'absence de données démographiques plus détaillées et géographiques plus granulaires.

- **Mots clés:** COVID-19, Canada, santé, collecte des données, populations marginalisées

Etowa, Josephine. 2020. "Building Strong Foundations for Health Equity: Strengthening Capacity for Disaggregated Data Collection & Use." OLIP Ottawa Local Immigration Partnership, Community Dialogue on COVID-19 Pandemic, Virtual Meeting, October 22, 2020. <https://drive.google.com/file/d/1u8WgKs67ee3pciJLrC3-tEo8e7onVKnd/view>

- **Abstract**

This PowerPoint was presented at the OLIP-COVID Community Dialog. As described in the Summary Report (<http://olip-plio.ca/wp-content/uploads/2020/11/SummaryReport-OLIP-COVID-CommunityDialogue.pdf>): «From the onset of the COVID-19 pandemic and upon the introduction of public health response measures in Ottawa in mid-March 2020, OLIP partners have recognized that immigrant and racialized populations were facing disproportionately higher risks of exposure to contracting the novel coronavirus. This recognition was based on 10 years of community-based planning for the health and wellbeing of immigrants(...) Health and Wellbeing Sector Table partners identified a need to hear directly from immigrant and racialized communities through a community dialogue. This will help center the experiences of the communities most affected by COVID-19 in ongoing planning for the health and wellbeing of immigrants during the pandemic(...) The agenda of the Community Dialogue included two sets of short presentations and two facilitated discussions in small groups. (...) Dr. Josephine Etowa, professor at the University of Ottawa and lead researcher on OLIP's COVID-19 Equity Data Initiative, spoke about the research plans to conceptualize health inequity and the role of for health equity. »

- **Keywords:** COVID-19, health equity, data collection, pandemic, immigrants, Ottawa.

Etowa, Josephine, Ilene Hyman, Charles Dabone, Ikenna Mbagwu, Bishwajit Ghose, Yujiro Sano, Muna Osman, and Hindia Mohamoud. 2021. "Strengthening the Collection and Use of Disaggregated Data to Understand and Monitor the Risk and Burden of COVID-19 Among Racialized Populations." *Canadian Studies in Population* 48 (2):201-216. doi: 10.1007/s42650-021-00050-2.

- **Abstract**

There is growing evidence that the risk and burden of COVID-19 infections are not equally distributed across population subgroups and that racialized communities are experiencing disproportionately higher morbidity and mortality rates. However, due to the absence of large-scale race-based data, it is impossible to measure the extent to which immigrant and racialized communities are experiencing the pandemic and the impact of measures taken (or not) to mitigate these impacts, especially at a local level. To address this issue, the Ottawa Local Immigration Partnership partnered with the Collaborative Critical Research for Equity and Transformation in Health lab at the University of Ottawa and the Canadians of African Descent Health Organization to implement a project to build local organizational capacities to understand, monitor, and mitigate the impact of the COVID-19 pandemic on immigrant and racialized populations. This research note describes the working framework used for this project, proposed indicators for measuring the determinants of health among immigrant and racialized populations, and the data gaps we encountered. Recommendations are made to policymakers, and community and health stakeholders at all levels on how to collect and use data to address COVID-19 health inequities, including data collection strategies aimed at community engagement in the collection of disaggregated data, improving methods for collecting and analyzing data on immigrants and racialized groups and policies to enable and enhance data disaggregation.

- **Keywords:** Population health, COVID-19, Determinants of health, Data collection, Disaggregated data, Immigrants, Racialized populations

- **Résumé**

Des plus en plus d'études montrent que le risque et le fardeau des infections à la COVID-19 ne sont pas également répartis dans la population et que les communautés racialisées connaissent des taux de morbidité et de mortalité disproportionnellement plus élevés. Cependant, en raison de l'absence de données ventilées selon le statut ethnique, il est impossible de mesurer comment les communautés immigrantes et racialisées vivent la pandémie et quel est l'impact des mesures prises (ou non) pour atténuer ces effets, surtout à un niveau local. Pour résoudre ce problème, le Partenariat local pour l'immigration d'Ottawa (PLIO) s'est associé au Laboratoire de recherche critique collaborative pour l'équité et la transformation en santé (CO-CREATH) de l'Université d'Ottawa et l'Organisation de la santé des Canadiens d'ascendance africaine (CADHO) aux fins de mettre en œuvre un projet visant à renforcer les capacités organisationnelles locales pour comprendre, surveiller et atténuer l'impact de la pandémie de la COVID-19 sur les populations immigrantes et racialisées. Cette note de recherche décrit le cadre de travail utilisé pour ce projet, les indicateurs proposés pour mesurer les déterminants de la santé chez les populations immigrantes et racialisées, et les lacunes que nous avons identifiées dans les données existantes. Des recommandations sont faites aux décideurs politiques et aux acteurs communautaires et de la santé à tous les niveaux sur comment collecter et utiliser les données pour remédier aux inégalités en matière de santé liées à la COVID-19. Ces recommandations font référence aux stratégies de collecte de données visant à impliquer les communautés, à l'amélioration des méthodes de collecte et d'analyse des données sur les immigrants et les groupes racialisés, et aux politiques nécessaires pour permettre et améliorer la désagrégation des données selon le statut ethnique.

- **Mots clés** : Santé, COVID-19, déterminants de la santé, collecte des données, données désagrégées, immigrants, populations racisées.

Thompson, Emily, Rojiemiahd Edjoc, Nicole Atchessi, Megan Striha, Imran Gabrani-Juma, and Thomas Dawson. 2021. "COVID-19: A case for the collection of race data in Canada and abroad." *Canada Communicable Disease Report (CCDR)* 47 (7/8):300-304. doi: 10.14745/ccdr.v47i78a02.

- **Résumé**

Les populations racialisées présentent invariablement des résultats en matière de santé plus faible, et ce, partout dans le monde. Cette tendance est devenue encore plus évidente dans le sillage de la pandémie de la maladie à coronavirus 2019 (COVID-19). Dans les pays où des données désagrégées selon la race sont régulièrement recueillies, comme les États-Unis et le Royaume-Uni, des rapports préliminaires ont révélé que les populations racialisées courent un risque accru d'infection et de mortalité liées à la COVID-19. Des schémas semblables se dessinent au Canada, mais, en l'absence de données individuelles, ils reposent sur des mesures indirectes comme la diversité des quartiers pour tenir compte de la race. Il s'ensuit que la collecte de données désagrégées selon la race au Canada est un élément crucial pour identifier les personnes susceptibles d'obtenir de faibles résultats liés à la COVID-19 et élaborer des interventions ciblées en santé publique afin d'atténuer les risques parmi les populations racialisées du Canada. Compte tenu de cet écart persistant, il est de la plus haute importance de préconiser un accès rapide à ces données en raison des défis que la pandémie de COVID-19 a mis en lumière parmi les populations racialisées au Canada et dans le monde.

- **Mots clés** : COVID-19, coronavirus, race, population racialisée, minorité visible, maladies infectieuses