

Ku-gaa-gii pimitizi-win

The COVID-19 cohort study of people experiencing homelessness in Toronto, Canada

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September 13th 2023

Land Acknowledgement

This meeting is taking place on land that has been home to First Nations for thousands of years. Toronto exists on the ancestral territory of the Mississaugas of the Credit, the Anishnabeg, the Chippewa, the Haudenosaunee and the Wendat peoples, and is home today to a vast diversity of First Nations, Inuit and Métis individuals from across Turtle Island.

Participant Acknowledgement

With gratitude, we acknowledge and thank the participants of the Ku-gaa-gii pimitizi-win study who took part in this project by sharing their lived and living experiences of homelessness during the uncertainty of the COVID-19 pandemic.

Ku-gaa-gii pimitizi-win

To guide our work, a spirit name was given in ceremony by Elder Dylan Courchene from Anishnawbe Health Toronto.

Ku-gaa-gii pimitizi-win, which translates in English to 'life is always/forever moving', reflects and honours the movement of homeless individuals across the land, the spirit and growth of the land we are on, and the force that connects us all to the future.

Collaborations

- The Ku-gaa-gii pimitizi-win project has been made possible through a number of ongoing, interdisciplinary collaborations and partnerships.
- One of the most significant of these relationships has been our collaboration with Anishnawbe Health Toronto.
- AHT is in possession of and maintaining health data collected from Indigenous participants through this research project.



March 2020 - An urgent need for data

We now know that COVID-19:

Posed a major threat to overall health

Spread rapidly in shelters; and

Increased risk for poor health outcomes

We also know that people experiencing homelessness <u>continue to</u> face a higher-risk for contracting SARS-CoV-2 and suffering from severe COVID-19 infection.

Current State of Knowledge

To date, limited studies have described COVID-19 incidence and transmission dynamics among people experiencing homelessness in Toronto using a longitudinal cohort design.

Main Study Questions

What is the prevalence and incidence of COVID-19 among PEH in Toronto over a 12-month observation period?

Are housing history, individual and shelter-level characteristics associated with incident COVID-19 infection among PEH?

Are housing, individual and shelter-level characteristics associated with worse health outcomes among PEH diagnosed with COVID-19?

Can we build an accurate and iteratively updated transmission model of COVID-19 in the homeless population with data from this cohort study?

PEH: People experiencing homelessness

Sub-Studies

Qualitative Exploration

Genomic Sequencing

Transmission Modelling

Doing Research During a Pandemic

- Within a year, over 20 co-investigators, 5 collaborators, a research team and many community partners came together to develop and initiate this study.
- Conducting research during times of uncertainty was made possible by dedicated interviewers and relationships that were fostered between the Survey Research Unit, the SSHA and shelter service providers.
- Working closely with recruitment sites including shelters and shelter hotels, and others, we prioritized building rapport with staff and understanding the spaces in which we planned to meet potential participants



Cohort Study Approach and Design

Participants

Sites of Recruitment: shelters, shelter hotels & 1 encampment Sampling: Random selection of 20% of residents at each site

Data and Sample Collection









Saliva

Finger-Prick Blood

Database Linkages

Follow-up: 12 Months

Timeline



Recruitment and Data Collection

736
participants
were
recruited in
total

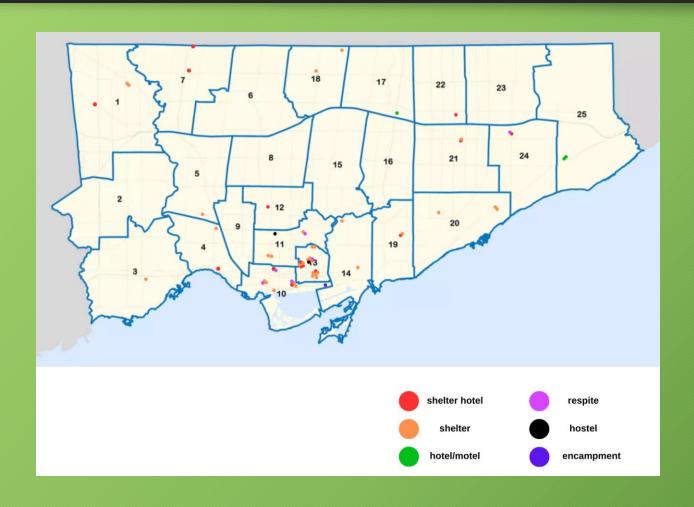
Of 736
participants
640 were
successfully
linked to
ICES using
OHIP
numbers

Interviewing
began June
16, 2021, and
ended Sept 9,
2022

A total of 61 shelter sites participated in the study

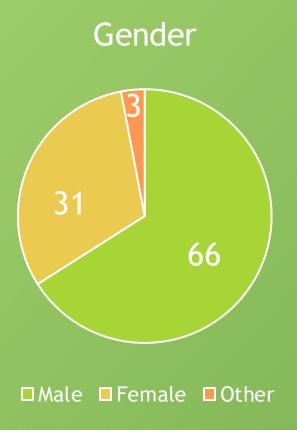
28 sites declined or could not be engaged

Where were participants recruited from?

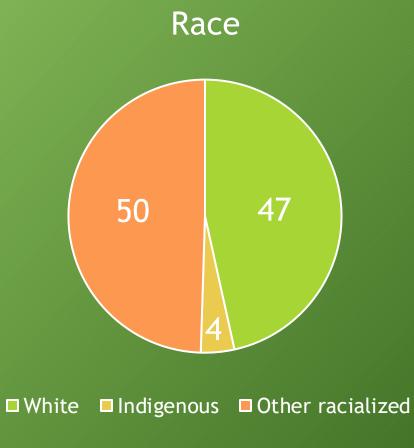


	Recruitment Sites				
	# of sites	total recruitment			
shelter hotels	16	286			
shelter	34	333			
respite	7	53			
hotel/motel	2	50			
hostel	2	12			
encampment	1	2			

Who are the participants?

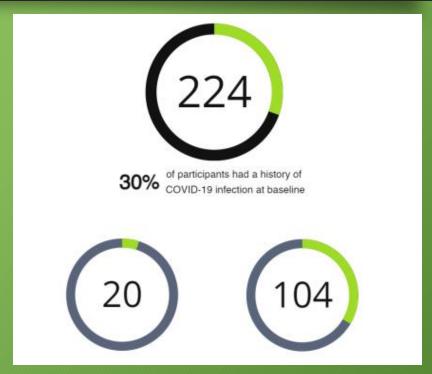


Age	%
16-19	2%
20-29	13%
30-39	23%
40-49	22%
50-59	22%
60-69	13%
70+	6 %



Early Learnings about Infection

- 30% of participants had a history of SARS-CoV-2 infection at baseline.
- Another 16% participants experienced their first infection by 6 months, most after Omicron became the dominant strain.
- Most did not have a positive PCR test.

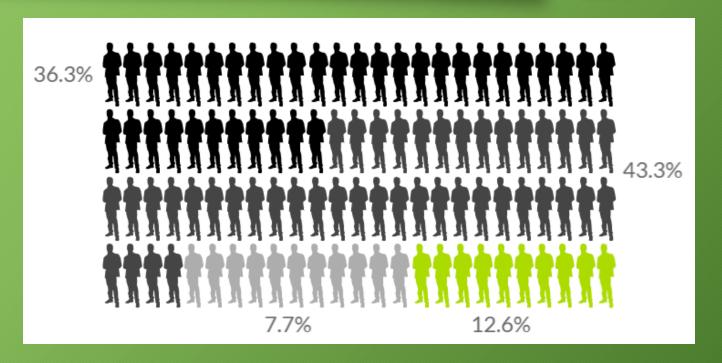




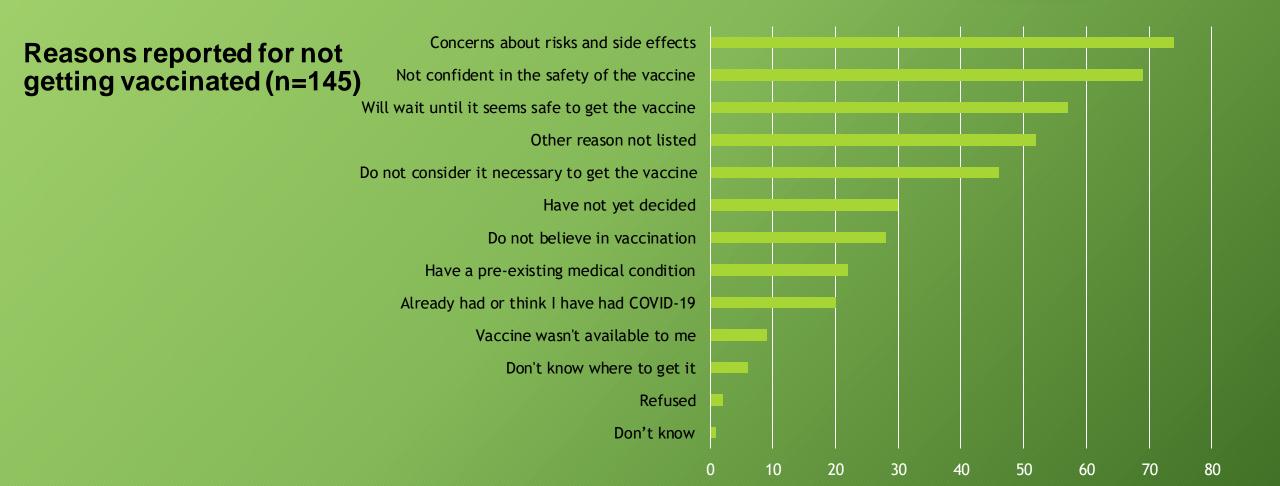
Early Learnings about Vaccination

By 6-months (Between November 2021 and April 2022):

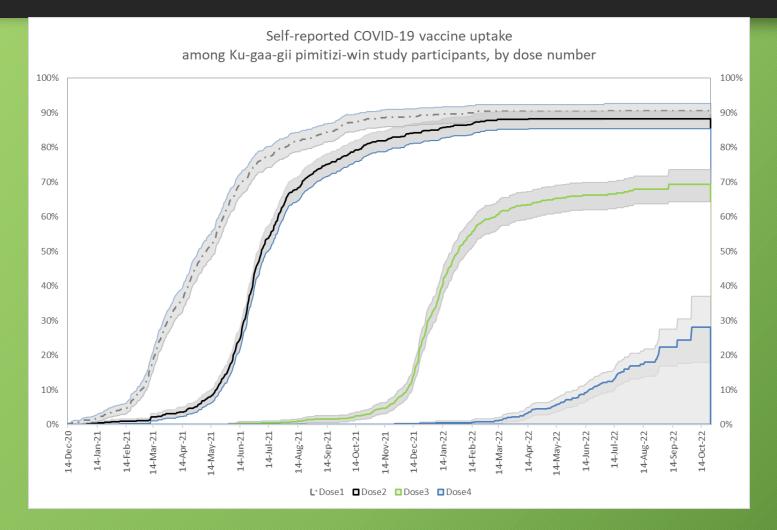
- 36.3% of participants received at least 3 COVID-19 vaccine doses
- 43.3% of participants had 2 doses
- 7.7% of participants had 1 dose
- 12.6% of participants remain unvaccinated



Reasons for not Getting Vaccinated



Vaccine Doses

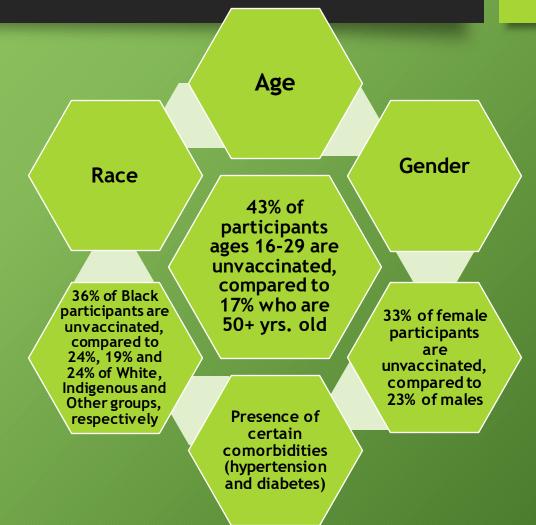


By the end of the study:

- 90.6% of participants had
 1+ vaccine dose;
- 88.3% had 2+ doses;
- 69.3% had 3+ doses;
- 28.1% had 4+ doses

Factors Associated with Being Unvaccinated at 6-months

	White	Black	Indigenous	Other
Male	12.3	12.8%	12.5%	13.6%
Female	12.8%	34.0%	8.0%	14.0%



Qualitative Sub-Study: Exploring the impact of the COVID-19 pandemic on people experiencing homelessness in Toronto, Canada

Led by Dr. Jesse Jenkinson Ph.D

We set out to better understand...

- The impact the pandemic and government responses were having on people living within the City of Toronto's shelter system.
- 42 individuals participated in qualitative interviews.

We asked people about their:

- Experiences during the COVID-19 pandemic.
- Opinions toward the COVID-19 vaccine.
- Enablers and barriers to vaccine uptake.
- Strategies to improve vaccine uptake. Sources of support, feeling safe and cared for.



Early Qualitative learnings...

Experiences: Agency over one's body and choice (for both choosing to get the vaccine and choosing not to)

• At first, it was like a choice and now it's like you feel like you have to, so it just feels like it's like got an agenda that's being like pushed you know. (ID_3933, NV_F_R)

Opinions: Trust in science, not the government:

• I trust the science. They're the guys that are looking into this and they really know. Governments is politics and I feel like their own self-interest in a lot of times get in the way of what needs to be done. (ID_0161, V_F_W)

Opinions: Confidence in the vaccine

• As soon as they said it was safe and as soon as they said you get it on your health card for nothing, I was like at the door knocking at the door. [Laugh] (ID_0498, V_M_W).

Early Qualitative learnings...

Strategies:

- Information from a trusted source (peer, family doctor, etc.)
- Information outreach prior to vaccination outreach
- Lay vaccinators
- Financial incentives
- Holistic approach (beyond just the vaccine) including access to healthy food, shelter, etc.

A snapshot of what's yet to come for Ku-gaa-gii pimitizi-win ...

- Investigation of excess mortality amongst PEH during the pandemic.
- Long-COVID following SARS-CoV-2 infection and associated increases in healthcare utilization
- Investigate comorbidities, COVID-19 testing results, health outcomes, and health care utilization using ICES databases



Emerging Learnings and Key Messages

- Infection burden among people experiencing homelessness in Toronto is very high
- Vaccination rates are also very high, much higher than in most other reported settings
- Targeted vaccination campaign efforts were effective, but need to target certain groups better.
- Congregate, crowded housing types are significantly associated with infection;
 the use of shelter hotels decreased risk for thousands of PEH in Toronto

Visit our Website to Stay Connected!

Here you will find:

- All academic publications
- The qualitative Community Report
- Newspaper features
- Scientist Bios & much more!



Please visit our website for more information:

https://maphealth.ca/ku-gaa-gii-pimitizi-win/

Contact Information

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Acknowledgements

- The Survey Research Unit team
- Participating shelter, encampment and COVID-19 distancing hotel staff
- The Waakebiness-Bryce Institute for Indigenous Health
- Anishnawbe Health Toronto
- MAP's Community Expert Group
- City of Toronto SSHA Division
- Gingras Lab
- Microbiology Lab
- Gommerman Lab

Questions