

**AFN C-19 National Task Force
Daily Update for: May 19, 2020**

Health Sector

<https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection.html#a1>

Areas in Canada with cases of COVID-19, as of 2020-05-19 11:00AM EDT

Province	Confirmed Cases	Hospitalization (ICU)*	Deaths	Recovered
BC	2,444	51 (12)	143	1,908
AB	6,683	65 (9)	128	5,519
SK	592	5 (3)	6	455
MB	290	1 (0)	7	257
ON	23,348	987 (167)	1,919	17,898
QC	43,627	1,771 (179)	3,596	12,045
Newfoundland/Lab	260	3 (1)	3	249
NB	120	0 (0)	0	120
NS	1,043	9 (5)	55	956
PEI	27		-	27
Yukon	11		-	11
NWT	5		-	5
Nunavut	0			
Repatriated Travelers	13			
Total	78,499	2,892 (376)	5,857	39,228
Active Cases= 33,002				

*These are numbers of *current* hospitalizations and ICU admissions. Some sources report the total *cumulative* number of hospitalizations and ICU admissions. Also, hospitalization data are amalgamated as they are reported by various hospitals; they are therefore updated sporadically, intermittently, and are likely to be less accurate and current than other data points.

	Cases	Deaths	Recovered
Globally	4,836,329	319,213	1,805,093

- Data is as of May 19 at 10:32am from Johns Hopkins University:
<https://coronavirus.jhu.edu/map.html>

Epidemic Summary

As of **May 13**, 2020 **81%** of COVID-19 cases were related to community transmission, while **19%** were either exposed while travelling or exposed to a traveler coming to Canada.

As of **May 18**, 2020, Canada has an overall case fatality rate of **7.5%**.

As of **May 18**, 2020, **50%** of all Canadian COVID-19 cases are reported to have recovered.

Risk to Canadians

COVID-19 is a serious health threat, and the situation is evolving daily. The risk will vary between and within communities, but given the increasing number of cases in Canada, the risk to Canadians is considered **high**.

There is an increased risk of more severe outcomes for Canadians:

- Aged 65 and over
- With compromised immune systems
- With underlying medical conditions

Data Sources:

British Columbia:

<https://experience.arcgis.com/experience/a6f23959a8b14bfa989e3cda29297ded>

Alberta: <https://covid19stats.alberta.ca/#cases>

Saskatchewan: <https://www.saskatchewan.ca/government/health-care-administration-and-provider-resources/treatment-procedures-and-guidelines/emerging-public-health-issues/2019-novel-coronavirus/cases-and-risk-of-covid-19-in-saskatchewan>

Manitoba: <https://www.gov.mb.ca/covid19/updates/index.html#cases>

Ontario: <https://www.ontario.ca/page/2019-novel-coronavirus#section-0>

Quebec: <https://www.inspq.qc.ca/covid-19/donnees>

New Brunswick:

https://www2.gnb.ca/content/gnb/en/departments/ocmoh/cdc/content/respiratory_diseases/coronavirus/case-map.html

Nova Scotia: <https://novascotia.ca/coronavirus/data/>

Prince Edward Island: <https://www.princeedwardisland.ca/en/information/health-and-wellness/pei-covid-19-testing-data>

Newfoundland and Labrador: <https://covid-19-newfoundland-and-labrador-gnl.hub.arcgis.com/>

Yukon: <https://yukon.ca/covid-19>

Northwest Territories: <https://www.hss.gov.nt.ca/en/services/coronavirus-disease-covid-19>

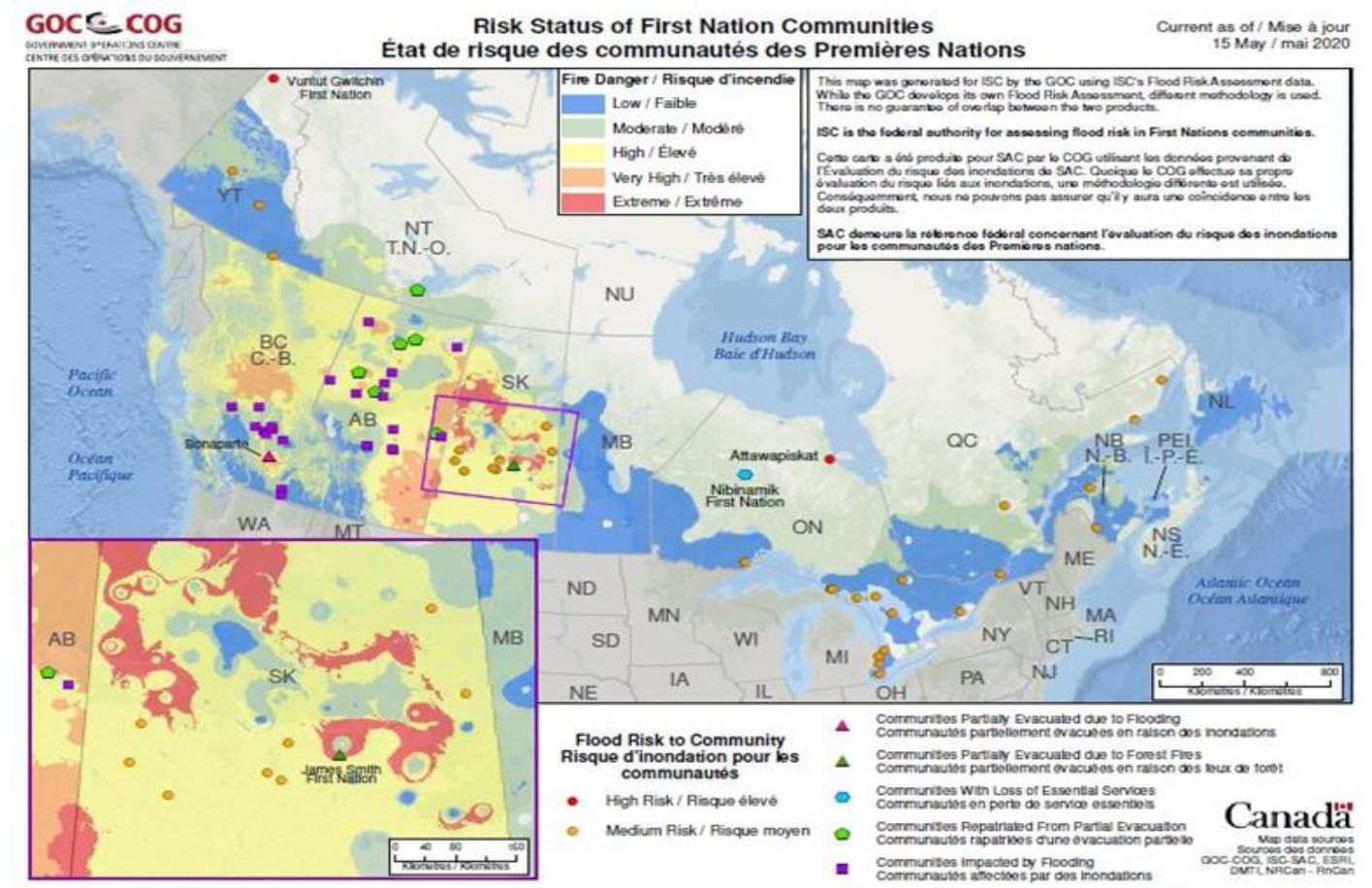
Additional source (national): <https://www.ctvnews.ca/health/coronavirus/tracking-every-case-of-covid-19-in-canada-1.4852102#alberta>

Housing, Infrastructure, Water & Emergency Management Sector

Local States of Emergencies:

First Nations Local States of Emergencies:

First Nation States of Emergency- As per ISC report May 15,2020									
Region	BC	AB	SK	MB	ON	QC	ATL	Territories	Total
Confirmed	57	33	4	20	69	4	7	2	196



2020 Flood Season General Assessments: As Per ISC EMD 2020 FN Flood / Wildland Fire Situation Report as of May 19, 2020 - **Updates in Bold**

****Please note that given the decrease in significant incidents, this report will now be issued on a bi-weekly basis****

FLOODING 2020 Flood Season General Risk Assessments - New Information in bold

- **BC: FLOOD RISK FORECAST – DECREASING**
 - **15MAY: Environment Canada issued a Weather Notification for southern BC over the long weekend. There is potential for sudden and heavy downpours to cause accelerated snowmelt and rise in water levels and flows.**

 - **AB: FLOOD RISK FORECAST – MODERATE TO HIGH...No Change**

 - **SK: FLOOD RISK FORECAST – MODERATE...No Change**

 - **MB: FLOOD RISK FORECAST – LOWERED IN SOUTHERN MANITOBA...No Change**

 - **ON: FLOOD RISK FORECAST –**
 - **15MAY2020: Flood risk at Moose Cree FN NIL to LOW. Moose River surveillance flights ended today. Break up on the Attawapiskat River imminent. Surveillance flights to start when ice breakup is confirmed. Fort Albany surveillance flights continue; no concerns at this juncture. Kashechewan (Chief Leo Friday) still under precautionary declaration of emergency but will lift emergency declaration in the coming days.**

 - **QC: FLOOD RISK FORECAST – MODERATE...No Change**

 - **ATL: FLOOD RISK FORECAST – MODERATE TO LOW...No Change**

 - **YT: FLOOD RISK FORECAST – LOW RISK...No Change**

 - **NWT: FLOOD RISK FORECAST – HIGH RISK...No Change**
-

Ontario:

- **Nibinamik FN (241) Population 400 - Loss of Essential Service – Diesel Generating System**
 - **15MAY2020: FN declared State of Emergency due to Covid-19 and issues with Diesel Generating System on 13MAY2020.**
 - **FN reports frequent power outages.**
 - **Water sanitation systems require power to operate.**

- Risk sewage backups.
- Further updates to follow.

Wildfire: All regions to Ontario showing an increase in Risk Levels

Regional Assessment

Region	Risk Assessment
British Columbia	HIGH
Alberta	HIGH
Saskatchewan	HIGH
Manitoba	MEDIUM-HIGH
Ontario	MEDIUM-LOW
Québec	LOW
New Brunswick	LOW
Prince Edward Island	LOW
Newfoundland & Labrador	LOW
Nova Scotia	LOW
Yukon Territory	HIGH
Northwest Territories	HIGH
Nunavut	MEDIUM

SASKATCHEWAN:

James Smith Cree FN (370) Population: 3,421

- 15MAY2020: Decision made to evacuate priority community members due to smoke from nearby wildfire.
 - Approx. 39 evacuees expected to evacuate to Prince Albert.
 - The wildfire is not yet contained.
 - Prince Albert Grand Council is coordinating food services for the evacuees.
 - There are no active or suspected cases of COVID-19 in the community.

Communications Sector

COVID-19 more severe for First Nations people

Winnipeg Free Press – May 15, 2020

<https://www.winnipegfreepress.com/special/coronavirus/covid-19-more-severe-for-first-nations-people-570518962.html>

'La Loche will survive this virus': Seeds of hope in Saskatchewan's COVID-19 epicentre

CBC - May 16, 2020

<https://ca.news.yahoo.com/la-loche-survive-virus-seeds-120000208.html>

Health researcher hopes COVID-19 means new policies for Indigenous peoples

The Canadian Press - MAY 17, 2020

<https://www.timescolonist.com/news/b-c/health-researcher-hopes-covid-19-means-new-policies-for-indigenous-peoples-1.24136620>

COVID-19 outbreak forces Native Women's Shelter of Montreal to close

CTV News - May 17, 2020

<https://montreal.ctvnews.ca/covid-19-outbreak-forces-native-women-s-shelter-of-montreal-to-close-1.4943369>

Numbers

<https://www.sac-isc.gc.ca/eng/1581964230816/1581964277298#chap5>

Confirmed cases of COVID-19

On First Nations reserves in provinces, as of May 18, ISC is aware of:

- 194 confirmed positive COVID-19
- 18 hospitalizations
- 3 deaths

Case numbers per region:

- British Columbia: 39
- Alberta: 35
- Saskatchewan: 46
- Ontario: 42
- Quebec: 32

Full Stories

COVID-19 more severe for First Nations people

Winnipeg Free Press – May 15, 2020

<https://www.winnipegfreepress.com/special/coronavirus/covid-19-more-severe-for-first-nations-people-570518962.html>

COVID-19 is spreading faster among First Nations people in Winnipeg and making them more sick, according to the first release of data on Indigenous people in Manitoba.

"It's in line with previous experiences where there was a higher rate of more severe illness among First Nations individuals, such as during (2009 swine flu) H1N1," said Dr. Marcia Anderson, a medical officer of health.

As of Friday morning, 16 First Nations people, all living off-reserve, have contracted the coronavirus, of whom two are active cases. There has been one case in both the southern and Interlake-eastern health regions; the other 14 all lived in the Winnipeg area.

The data came after mounting calls to make such figures public; the Assembly of Manitoba Chiefs has pledged to release updates every Friday.

While 16 people is a small sample size, Anderson noted that four were hospitalized, which she said is more than double the general hospitalization rate, which appears to be less than 10 per cent.

The proportion of infected First Nations people transmitting COVID-19 within their homes or families, known as the "secondary attack rate", is 30 per cent, compared with 13 per cent of Manitobans overall.

Anderson said crowded urban housing and a lack of access to affordable healthy food helped spread the H1N1 swine flu in 2009, and is likely doing the same with the coronavirus.

She said the factors that make COVID-19 more deadly are also more prevalent among First Nations in the province, including hypertension, lung diseases and diabetes.

The First Nations cases are overwhelmingly female, 13 of 16, which Anderson said could be a result of women doing more caregiving or frontline work than men, or possibly more testing.

The ages ranged from one to 69.

Manitoba nurses have asked anyone testing positive for COVID-19 a series of questions, which since April 2 include whether the person identifies as First Nations, Métis or Inuit.

That's an optional question; Anderson said many are likely reluctant to identify as Indigenous, fearing discrimination from health-care workers. She said that partially stems from medical experiments on residential-school attendees.

The province has also compared the identities of COVID-19 carriers against The Indian Register, and identified eight people who have First Nations status from March 13 until nurses started asking about ancestry on April 2.

Anderson said the province will continue to do this, but only to help form the aggregate data.

She stressed that having Indian status won't be then marked into people's health files.

There have been no cases reported on Indigenous reserves; federally run nursing stations have helped administer 1,488 tests in 27 communities as of Tuesday, and none has come back positive.

The province's public health chief, Dr. Brent Roussin, called the information-sharing agreement "a great partnership" and praised "terrific leadership" on reserves for keeping out COVID-19.

"It was the goal we were after, and we're not out of things yet."

Friday's data release does not include Inuit or Métis people.

'La Loche will survive this virus': Seeds of hope in Saskatchewan's COVID-19 epicentre CBC - May 16, 2020

<https://ca.news.yahoo.com/la-loche-survive-virus-seeds-120000208.html>

Indigenous leaders and residents of La Loche and area say the community remains resilient as it grapples with being the epicentre of COVID-19 in Saskatchewan.

The vast majority of the province's active cases are in and around the small, remote community, located about 600 kilometres northwest of Saskatoon.

"We survived the smallpox a while ago. We will still continue," said Federation of Sovereign Indigenous Nations Chief Bobby Cameron.

His message was echoed by La Loche Mayor Robert St. Pierre who had one message for fellow community members:

"We will get through this. Stay at home and practice social distancing."

The community was already vulnerable before the outbreak, with tragedy in its recent past along with high rates of suicide and addiction. Four years ago, La Loche was the scene of a deadly shooting that took four lives and injured several others.

A Saskatchewan psychiatrist who works with clients in La Loche told CBC earlier this week that there were already not enough mental health supports in place prior to the pandemic. Now with stress and anxiety during an outbreak, people in La Loche have even less access.

Despite this, community members are hopeful.

'I feel like a bird in a cage'

David Ruelling is among those practising physical distancing. He lives in the neighbouring Clearwater River Dene Nation and hasn't been able to see his two elderly parents, who live in La Loche, for weeks.

"I am scared for my father. My father is elderly and he has very poor lungs. I'm really afraid for him. If he catches COVID-19, I'm sure he won't survive it. He's just too weak," said Ruelling from his home.

Ruelling said not being able to see his family takes its toll.

"I feel like a bird in a cage. I would love to go see my brother. In a strange way, the community is closed off from everyone else. We're fine within ourselves. We're the epicentre of this pandemic. It feels that way," he added.

Feeling "caged" is a sentiment being expressed by other northern Saskatchewan residents as well. Travel restrictions, part of a revised public health order issued by Saskatchewan's chief medical health officer, were announced by Premier Scott Moe on April 30.

The updated order outlawed all non-critical travel into and out of the Northern Saskatchewan Administrative District, which covers nearly half of the province but has a low population relative to the rest of Saskatchewan.

Below map showing the region affected by the restrictions. Don't see it? [Click here.](#)

The order also required northern residents to remain in their local communities, except for grocery runs and medical appointments, and to practise physical distancing.

Travel restrictions remain through May Long weekend

Premier Moe says the travel restrictions may come under discussion again with northern leaders "in the days ahead" but stressed that talks about potentially relaxing them in some northern areas won't happen before the May long weekend.

"I think it is fair to say that if these numbers hold, we will have a discussion with northern leaders as well as with others on, 'Can we really focus our restrictions to where they need to be?'" Moe said Wednesday afternoon.

Moe said such conversations would also focus on what the restrictions initially set out to do, "which is to curb the spread of the COVID-19 virus and not impact those communities that aren't currently being impacted with infections."

Health researcher hopes COVID-19 means new policies for Indigenous peoples

The Canadian Press - MAY 17, 2020

<https://www.timescolonist.com/news/b-c/health-researcher-hopes-covid-19-means-new-policies-for-indigenous-peoples-1.24136620>

A health researcher studying COVID-19 as part of a national immunity task force hopes the pandemic elevates concern for persistent health issues, such as inadequate housing, for Indigenous people in Canada.

"This pandemic has opened the eyes for a lot of people across Canada," said Dr. Carrie Bourassa, scientific director of the Institute of Indigenous Peoples' Health.

"I would like to think that what these ... studies will do is change a lot of policies for Canadians and for Indigenous people.

"I hope that this will also raise the bar and help people to understand that equity has not been reached for Indigenous peoples in Canada."

Bourassa was recently tapped to come up with a plan to engage First Nations, Metis and Inuit people in studies about how the virus has spread and who is immune. The Anishinaabe-Metis professor at the University of Saskatchewan said an Indigenous advisory circle will soon be announced for the two-year project.

It's critical Indigenous people are included in such studies, she said, because they could be more susceptible to the virus, given factors such as overcrowded housing and poor access to healthy food and clean water.

"Those are now huge mitigating risk factors," she said. "It gets exasperated in times of a pandemic."

The federal government has reported at least 190 confirmed cases of COVID-19 on reserves in British Columbia, Alberta, Saskatchewan, Ontario and Quebec.

Communities in Saskatchewan's far north, including La Loche, a Dene village 600 kilometres northwest of Saskatoon, have been dealing with an outbreak after the virus travelled there with someone who had been at an oilsands work camp in northern Alberta.

Indigenous Services Minister Marc Miller has said that coming out of the pandemic there will be a need to come up with a clear plan to address realities such as overcrowding, historic under-funding of health services and a high rates of diabetes.

Bourassa said access to health care is a major issue, including future access to a potential vaccine.

"It's often the case that marginalized populations don't get access to treatment."

COVID-19 outbreak forces Native Women's Shelter of Montreal to close

CTV News - May 17, 2020

<https://montreal.ctvnews.ca/covid-19-outbreak-forces-native-women-s-shelter-of-montreal-to-close-1.4943369>

MONTREAL -- For the first time since its founding, the Native Women's Shelter of Montreal is closed.

Executive director Nakuset said she was forced to close the shelter, that provides a safe environment for Indigenous women, after a COVID-19 outbreak forced residents to temporarily be moved to a hotel, while the establishment can be cleaned and those infected can recover.

"I've never closed the shelter, and I didn't want to close the shelter," said Nakuset. "But I have to take care of the clients."

Nakuset confirmed that seven of the 14 staff members had confirmed cases, but the shelter did not want to say if any residents tested positive for confidentiality reasons.

The closure and move came after multiple attempts to get local health and social services personnel to come test residents, and a frustrating ordeal getting assistance, according to Nakuset.

When the pandemic first began in March, shelter staff members were put in two core groups: one at home, and one at the shelter. Should any staff get sick in the first core, the second would replace the first.

“It was only around May 4 that staff started to feel sick,” said Nakuset. “We pulled out core 1, and stuck in core two, but then core two started to get sick.”

With half the staff in isolation, the shelter was operating with a skeletal staff of one at times. Following the initial pandemic declaration, residents were told to stay in their rooms, communal meals were cancelled, and staff told residents to not leave the shelter. Nakuset said things went smoothly, but then the virus “hit hard.”

Meanwhile, equipment was very slow to arrive.

“Since the beginning, we have been asking public health to come in and give us face masks, gloves, disinfectants, give us all these things, and they were so slow to bring anything like that,” said Nakuset. “As a matter-of-fact, we got a lot of the stuff from community people.”

Nakuset said there were several issues with communication where someone at CIUSSS South Central would promise something on the phone, then reverse course in writing.

A spokesperson for the CIUSSS South Central acknowledged some confusion at the onset of the outbreak but said the shelter received the resources they needed.

Nakuset spends her time at Resilience Montreal near Cabot Square and works with the shelter remotely. She said the ordeal has been discouraging, as requests continued to be denied.

She could not get tests for people at Cabot Square or the women at the shelter.

Eventually social workers Emily Brunton and Simon Beauregard arrived to help at Cabot Square. Thankfully, a solution arrived.

Annie Arevian from the CIUSSS contacted Brunton and found a hotel where the women could stay.

The seven women and three children were driven to a testing site, and then taken to the hotel where they will remain for two weeks.

There are plans for a team to arrive Monday and thoroughly clean the entire shelter.

Nakuset is grateful for those that arrived to construct a solution.

“If I didn’t have Emily fighting for me, fighting for the Native Women’s Shelter, we would be in dire straights,” said Nakuset. “It was like a ticking time bomb... It is a common theme for all of the homeless organizations.”

Nakuset said outbreaks in the homeless population are a constant problem.

“I’m dealing with COVID at Cabot Square and COVID at the Native Women’s shelter,” she said.