

**AFN C-19 National Task Force
Daily Update for: May 4, 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 2020-05-04 11:02AM EDT

Province	Confirmed Cases	Hospitalization (ICU)*	Deaths	Recovered
BC	2,171	79 (24)	114	1,357
AB	5,766	89 (19)	95	2,713
SK	433	14 (3)*	6	305
MB	281	5 (0)*	6	237
ON	17,923	984 (225)	1,300	12,505
QC	31,865	1,754 (218)	2,205	7,258
Newfoundland/Lab	259	4 (2)	3	232
NB	118	0 (0)	-	118
NS	971	6 (2)	37	624
PEI	27		-	24
Yukon	11		-	11
NWT	5		-	5
Nunavut	1			
Repatriated Travelers	13			
Total	59,844	2,935 (493)	3,766	25,408
Active Cases= 30,670				

*Some provinces report numbers *current* hospitalizations and ICU admissions. Others report the total *cumulative* number of hospitalizations and ICU admissions. Also, numbers are amalgamated as they are made available from various hospitals; they are therefore updated intermittently and are likely to be less accurate and current than other data points.

	Cases	Deaths	Recovered
Globally	3,534,367	248,164	1,135,021

- Data is as of May 4 at 11:32am from Johns Hopkins University:
<https://coronavirus.jhu.edu/map.html>

Epidemic Summary

At this time, **70%** of COVID-19 cases were related to community transmission, while **17%** were either exposed while travelling or exposed to a traveler coming to Canada. The remaining **13%** are “pending”.

As of **May 3**, 2020, Canada has an overall case fatality rate of **6.3%**.

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

As provided by Pamela Wolfe-Roberge, CDCD, FNIHB/ISC

Please see below a summary of COVID-19 test positive cases, associated with First Nations communities in Canada, reported through communities, FNIHB Regional Medical Officers, and media as of **May 1, 2020**

Jurisdiction	BC	AB	SK	MB	ON	QC	ATL	NR
# test positive COVID-19 Cases	33	23	16	0	36	30	0	17*

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: 193 per ISC as of May 5, 2020

Region	BC	AB	SK	MB	ON	QC	ATL	Territories	Total
Confirmed	56	33	4	20	67	4	7	2	193

2020 Flood Season General Assessments: As Per ISC EMD 2020 FN Flood / Wildland Fire Situation Report as of May 1, 2020

Updates in **Bold**

FLOOD

- **BC: No Change**
- **AB: High Risk Flooding**
 - **Fort McKay First Nation (467)(CEO - George Arcand Jr.) - 4MAY2020: Flood surge waters still have not reached Ft McKay. River forecast has indicated that if the ice breaks in the Ft McMurray town site without further impediment, worst case prediction is a 4 to 7m surge reaching Ft. McKay. Currently, most of the homes and infrastructure are well back and above the bank. Two homes closest to the bank are well above the bank. Only one is currently occupied. Community has been planning in the eventuality of an evacuation for the occupied home which be a relocation to somewhere within the community. Sandbags (500) have been staged by RMWB Ops Section to the community as a mitigation measure if they are required. There was one fatality from Ft McKay First Nation that occurred in the Firebag River area north of Ft McMurray in which high water on a creek was a contributing factor. According to media, RCMP said officers were called to help two people stranded on the Athabasca River, northeast of the hamlet of Fort McKay. The two men had been on ATVs on a trail when water levels surged. They were able to hold on to a log until they could be rescued, said police. Both were**

taken to hospital in Fort McMurray, but the older man died. Two women, two children and two dogs were also rescued from a nearby cabin.

- **SK: Monitoring Water Levels (Low Flood Risk)**
 - **Red Earth First Nation (356) (Fabian Head) On-Reserve Population 1,642- 1MAY2020: April 29, 2020, Water Security Agency (WSA) notified the First Nation and Prince Albert Grand Council (PAGC) that the Carrot River had peaked on April 28, 2020 resulting in reduced water levels. PAGC will continue to monitor the situation with Red Earth, the province, and Northern Inter-Tribal Health Authority (NITHA). No further imminent threat of overland flooding to the community at this time. Localized flooding occurring, however, as a result of poor drainage; First Nation steaming culverts to increase natural drainage and completing further mitigation efforts by sandbagging areas that are impacted. No requirement for shelter-in-place and/or evacuation - the First Nation has been working on preparedness plans for sheltering in place (within Covid19) and/or evacuation – discussions with PAGC, NITHA, and the Red Cross have and continue to take place. Based on the following water update, they are hopeful they will not encounter any further issues and will not see a need to activate evacuation planning. ISC supporting the First Nation through EMAP with drainage assessment.**
 - **Cumberland House Cree Nation (350) (Chief Rene Boyer) On-Reserve Population 921 – 1MAY2020: Although they have not reported any issues related to spring flooding, they continue to monitor water levels. April 29, 2020, PAGC further advised they received information from the province indicating Cumberland House was seeing sustained outflows from the river system which would continue until May 1, 2020.**
- **MB FLOOD RISK FORECAST – LOWERED IN SOUTHERN MANITOBA**
- **ON FLOOD RISK FORECAST – HIGH IN GREAT LAKES AREA DUE TO ELEVATED WATER LEVELS**
 - **1MAY2020: According to ECCC there is a risk of flooding of low-lying areas due to rainfall and snowmelt in Northeastern and Southern Ontario. The Great Lakes shorelines remain under a Flood Watch due to high water levels.**
- **QC No Change**
- **ATL FLOOD RISK FORECAST – LOW**
 - **1MAY2020: According to ECCC, water levels in the Saint John River are forecast to reach, but not exceed, flood stage in two communities: Fredericton on Sunday and in Gagetown on Monday. The New Brunswick Emergency Measures Organization is not anticipating widespread effects given the current forecast but is ready to respond if the situation changes.**
- **YT FLOOD RISK FORECAST – MODERATE**

- **1MAY2020:** The Yukon and Klondike Rivers may experience moderate ice jam intensity in the next five days. Moderate ice jamming and minor flooding of the Klondike River in the Rock Creek area should be expected until May 6th. A moderate ice jam on the Yukon River is also expected at Dawson or Moosehide between May 2nd and May 5th, although probability of flooding remains low for Dawson.

Wildfire: No Update

Articles of Note:

- **COVID-19 in Sask: Northern leaders say 'drastic' action could occur if public health orders not followed**
– <https://www.cbc.ca/news/canada/saskatoon/covid-19-update-may2-1.5553647> - **May 02, '20**
- **Mi'kmaw technology educators shift 3D printers to producing face shields**
– <https://www.cbc.ca/news/indigenous/mi-kmaw-3d-printers-ppe-coronavirus-1.5551215> – **May 04, '20**
- **Walpole Island First Nation sets up medical tent, hands out supplies amid outbreak in community**
– <https://www.cbc.ca/news/canada/windsor/walpole-island-first-nation-medical-tent-1.5551923> - **May 01, '20**
- **Federal stimulus package 'a lifeline' for Indigenous businesses in northern Ontario, says advocacy group**
– <https://www.cbc.ca/news/canada/thunder-bay/indigenous-business-stimulus-thunder-bay-1.5549059> - **May 02.202**
- **COVID-19 in Sask: Northern leaders say 'drastic' action could occur if public health orders not followed** - <https://www.cbc.ca/news/canada/saskatoon/covid-19-update-may2-1.5553647> – May 02, 2020
- **Old Crow - Yukon flood warnings mean moving to the mountains** - <https://www.newsoptimist.ca/news/old-crow-yukon-flood-warnings-mean-moving-to-the-mountains-1.24128679> – May 03, 2020

Communications Sector

Checkpoints on highways through M'Chigeeng First Nation 'unreasonable' neighbouring mayor says

CBC News - May 04, 2020

<https://www.cbc.ca/news/canada/sudbury/mchigeeng-highway-checkpoints-covid19-1.5554142>

Saskatchewan defends COVID-19 checkpoints following criticism from Indigenous group
Canadian Press - May 3, 2020

<https://www.thestar.com/news/canada/2020/05/03/province-defends-covid-19-checkpoints-following-criticism-from-indigenous-group.html>

What do we really know about suicide risk in the pandemic?

Toronto Star - May 2, 2020

<https://www.thestar.com/news/canada/2020/05/02/what-do-we-really-know-about-suicide-risk-in-the-pandemic.html>

COVID-19 outbreaks in 23 First Nations prompt worries

The Canadian Press - May 1, 2020

<https://www.ctvnews.ca/canada/covid-19-outbreaks-in-23-first-nations-prompt-worries-1.4920181>

Numbers

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

As of May 1, ISC is aware of 138 confirmed positive COVID-19 tests on First Nations reserves in provinces.

- British Columbia: 33
- Alberta: 23
- Saskatchewan: 16
- Ontario: 36
- Quebec: 30
-

Thunder Bay health unit confirms new case of COVID-19, bringing total to 71

<https://www.cbc.ca/news/canada/thunder-bay/thunder-bay-health-unit-new-covid-19-1.5552712>

Canada takes baby steps toward normalcy; Quebec passes 2,000 COVID deaths

<https://www.thestar.com/news/canada/2020/05/01/covid-19-threat-to-first-nations-inuit-communities-grows-as-it-eases-elsewhere.html>

Walpole Island First Nation sets up medical tent, hands out supplies amid outbreak in community

<https://ca.news.yahoo.com/walpole-island-first-nation-sets-124353125.html>

COVID-19 outbreaks in 23 First Nations prompt worries

<https://www.ctvnews.ca/canada/covid-19-outbreaks-in-23-first-nations-prompt-worries-1.4920181>

Full Stories

Checkpoints on highways through M'Chigeeng First Nation 'unreasonable' neighbouring mayor says

CBC News - May 04, 2020

<https://www.cbc.ca/news/canada/sudbury/mchigeeng-highway-checkpoints-covid19-1.5554142>

There's conflict brewing over two provincial highways on Manitoulin Island.

Highway 540 and Highway 551 both run through M'Chigeeng First Nation.

On April 25, Chief Linda Debassige and council instituted a non-essential travel ban, as a way to keep COVID-19 out of the community.

That ban includes checkpoints on the two roads where drivers are stopped and screened. Those deemed non-essential are prevented from continuing further.

In a notice, the chief stated that data collected showed a large amount of traffic coming through, and stopping in the community, which she said increased the risk of exposure to the virus.

"We continue to strongly encourage our members to stay home during this time," Debassige said.

The statement goes on to say this is an "unprecedented time that requires unprecedented measures to protect our loved ones as best we can."

"Council has determined that the preservation of life and health of our community is the most important and is the determining factor of this decision."

The checkpoints have been operational for more than a week, and are reportedly causing headaches and frustrations for drivers who use the highways to get to other parts of Manitoulin.

Al MacNevin, mayor of the Town of Northeastern Manitoulin and the Islands (NEMI), says he's heard those complaints.

Drivers who are turned away then must detour on back roads; some that are unfamiliar or not meant to handle extra traffic.

"They're finding themselves heading down roads and then ending up at a dead end, at a resort that's closed, on a gravel road and pulling into farmer's driveways to ask for directions to find their way back," MacNevin said.

"Not everybody that's being stopped is someone that's grown up or lived on the island for their life."

MacNevin believes the highway checkpoints have created an 'unreasonable burden' on other residents on Manitoulin Island.

"We're concerned that could escalate into a problem at a blockade that's not supervised by authorities such as police," he said.

MacNevin says the two roads are provincial highways, which means they fall under the jurisdiction of the Ontario Ministry of Transportation.

"If the province decides that the time has come to restrict travel then we expect they would issue an emergency order much like all the others we've worked with them on," MacNevin said.

"Whether it's the closure of marinas, parks or trails, we've supported their efforts, and if and when they deem it necessary to restrict travel, we'll support that as well."

MacNevin has written a letter to the Minister of Transportation, Caroline Mulroney to intervene. A similar letter was copied to Solicitor General Sylvia Jones.

He heard from the MTO office staff on Friday that he should expect to be contacted for a conversation soon.

In the meantime, MacNevin has proposed an alternative to M'Chigeeng First Nation. Three other nearby First Nations also have provincial highways running through each of them. MacNevin says those communities are allowing vehicles to flow freely on the provincial roads, but have restricted traffic on roads that exit into their respective communities.

"It would make people safer and still allow the community to protect itself from people traveling in and out."

MacNevin understands M'Chigeeng First Nation's concern and agrees with encouraging people to stay home to help keep COVID-19 from spreading.

He has repeated a similar message to would-be visitors or cottage-owners on Manitoulin Island.

"The reality is that the province hasn't passed any regulations restricting travel between these communities so [domestic travelers within the province] are not breaking the law."

There are only two small hospitals on Manitoulin Island, and MacNevin says if visitors travel to the island the health care resources could be stretched thin if the pandemic worsens.

"Think about what the impact might be if you come at this point in time."

MacNevin has even been asked if the municipality would consider closing the swing bridge at Little Current, where most visitors travel on to Manitoulin.

"The reality is that's a provincial responsibility, we have no authority to close [the bridge] or stop people on a provincial highway," he said.

"We support the messages encouraging people to stay home, but our community does not believe that we should be [illegally] stopping people from traveling, and putting everybody at risk that's at those checkpoints," MacNevin said of the M'Chigeeng situation.

"We would like to find another solution."

Saskatchewan defends COVID-19 checkpoints following criticism from Indigenous group Canadian Press - May 3, 2020

<https://www.thestar.com/news/canada/2020/05/03/province-defends-covid-19-checkpoints-following-criticism-from-indigenous-group.html>

BEAUVAIL, SASK.—An Indigenous group in Saskatchewan is criticizing the province's management of checkpoints that are meant to protect northern communities experiencing outbreaks of [COVID-19](#).

Federation of Sovereign Indigenous Nations Chief Bobby Cameron says in a news release that the province was quick to take over local checkpoints, but his group is now getting calls that officers are stopping northerners from travelling south to get groceries.

Beauval Mayor Nick Daigneault says in the release that he was assured by the government that community members would be allowed to travel for groceries after their only grocery store was closed due to COVID-19.

Chief medical health officer Dr. Saqib Shahab expressed concern last week about an outbreak of COVID-19 in La Loche, a Dene village about 600 kilometres northwest of Saskatoon, and the Saskatchewan Health Authority has also declared an outbreak in Beauval.

The Saskatchewan Public Safety Agency said in an email that travel within the northern region is allowed for residents, but that people should not travel for food or medical care if it's already available within their own community.

The email conceded that not all checkpoints are staffed 24/7, but that they all have permanent signage.

“Limiting non-essential travel helps prevent the spread of COVID-19 into communities throughout the province,” the government email stated.

Shahab told a news conference last week that aggressive contact tracing was underway in La Loche and that between 50 to 100 health authority staff are set to be in the community for added support.

The virus is spreading through the community after someone who had been in northern Alberta brought it into the region.

The public safety agency email noted checkpoints are staffed by the Saskatchewan Public Safety Agency, along with provincial protection and response team members, which it says includes highway patrol and conservation officers.

It also noted RCMP have increased patrols on roads in the Northern Saskatchewan Administration District.

Daigneault said his community had hired its own security companies to monitor the checkpoints, but said the government came in “hard, fast and very disorganized.”

Cameron, meanwhile, suggested in the news release that the outbreaks could have been prevented if the province had heeded his organization’s calls for checkpoints and border closures earlier.

What do we really know about suicide risk in the pandemic?

Toronto Star - May 2, 2020

<https://www.thestar.com/news/canada/2020/05/02/what-do-we-really-know-about-suicide-risk-in-the-pandemic.html>

In England, a 19-year-old died in hospital in late March, following a suicide attempt. She was “deeply affected by the pandemic” and felt she “could no longer cope,” according to media reports.

A few days later, in Germany, a state finance minister took his own life. The economic fallout from the [coronavirus](#) crisis and the “population’s huge expectations, particularly of financial help,” had “overwhelmed him,” the state’s governor said.

And last Sunday, a top emergency room doctor who treated COVID-19 patients in hard-hit Manhattan, and contracted the virus herself, died by suicide. Her father told the New York Times, “She tried to do her job, and it killed her.”

In this extraordinary time of loss, sickness, social isolation and economic insecurity, there has been a string of media reports linking the pandemic to suicide. These tragic stories, along with a [surge in calls to crisis lines](#) and recent articles in scientific journals arguing that the conditions are rife for a spike, are fuelling perceptions that COVID-19 will trigger a rise in suicides.

But some mental health experts are pushing back against these dire prognostications, which they say are not rooted in solid evidence, with past pandemics providing few clues about how the complex set of factors at play during COVID-19 will influence suicide rates. Rhetoric about the inevitability of suicide carries risks, they say, including reinforcing a sense of hopelessness, and diverting resources away from marginalized groups who have lost access to basic mental health services in the crisis.

They caution against connecting the pandemic to the act of taking one’s own life.

“I really understand why people want to make a direct line to cause when they know something about someone,” said Dr. Tyler Black, a psychiatrist and suicide expert at B.C. Children’s Hospital in Vancouver. “But suicide is so much more complex than that.”

“The rough answer, and this is the tough answer for people who are trying to understand why people they care about died,” Black said, “is that most of the time in suicide, we don’t know why.”

It is right to be concerned about the economic toll of the crisis on communities, said Nova Scotia Sen. Stan Kutcher, professor emeritus of psychiatry at Dalhousie University. However, when it comes to suicide risk, “large blanket statements are unlikely to be correct because there’s just too much individual variability,” he said.

Kutcher is calling for a more measured approach to suicide prevention in the pandemic — one that focuses on providing supports to those he says are most at-risk, including the severely mentally ill, those without access to virtual care and some Indigenous communities, where there were high suicide rates before COVID-19.

“Instead of making stuff up, and saying, ‘Oh my God, the sky is falling,’ We can say, ‘We know what the factors are that put people at increased risk — not just for suicide, but for poor outcomes,’” he said. “We can do something about it.”

In Canada, roughly 4,000 people take their own lives each year, according to a [2018 report](#) by the Mental Health Commission of Canada and the Public Health Agency of Canada, making suicide the ninth leading cause of death in this country, and a significant public health concern. There are known risk factors, such as depression, addiction, family history, incarceration, economic hardship, loneliness, time of year (spring and summer) and occupation (physicians, police officer and first responders), the report states.

There is a constantly evolving and improving range of evidence-based treatments for those experiencing suicidal thoughts, including medications, therapy and followup care. In [Indigenous communities](#), traditional healing practices and other community-led interventions can counter the legacies of colonialism that have driven up suicide rates, according to the Centre for Suicide Prevention.

Yet there is still a lot we don’t know about suicide, which is relatively rare, and is oftentimes an impulsive act, occurring within a few minutes of the decision, Kutcher said.

As a clinician, he participated in “psychological autopsies,” interviewing friends and relatives to try to figure out what led to deaths by suicide.

“Sometimes you can get a glimmer, and other times you just have no idea,” he said.

In a broad sense, COVID-19, which has triggered lockdowns and upended the economy, has heightened some of the known risk factors for suicide, but “if it is a factor it may only be a factor in a particular person in a particular circumstance, and not for everybody else,” Kutcher said.

At the same time, the pandemic has also introduced protective factors, such as “social cohesion” — the sense we are all in this together — which has historically coincided with a reduction in suicides, said Dr. Juveria Zaheer, a clinician scientist at the Institute for Mental Health Policy Research and a psychiatrist in the emergency department at CAMH, citing the Second World War as an example.

Zaheer said her patients are experiencing the pandemic in different ways.

“I’ve had people who have major mental illness say to me, ‘This is really scary, but this isn’t what I’m most worried about right now,’” she said.

Another patient with a history of trauma is sharing coping strategies with friends, she said.

“What’s happening right now is a situation we have never experienced in our lifetimes. It is very difficult to know what the collective impact will be for a while,” she said. “We just don’t have the data.”

(In Canada, it will be a long wait for nationwide numbers of suicides in the pandemic, with Statistics Canada having yet to release cause of death information for 2019. This was scheduled for November 2020, but this date has been pushed back because of limited capacity in the pandemic, with no new date confirmed, a spokesperson said.)

A [literature review](#) published last month in the Lancet Psychiatry, which probes the question of whether suicide rates will rise in the pandemic, is one of several recent journal articles to note an apparent link between the 1918 [Spanish flu](#) pandemic in the U.S. and an increase in suicides. However, the connection is hardly conclusive: In the [abstract of the paper](#) cited in the Lancet article, the author acknowledges, “Further individual-level aggregate studies are needed to confirm the findings of the study.”

James Coyne, an emeritus professor of psychology in psychiatry at the University of Pennsylvania, who spent a decade in Europe consulting on multi-level suicide prevention programs, said we “should be careful about the relevance of the Spanish flu to COVID-19.” A century ago, “There were no drugs to treat mental disorder except opium and the ‘rest cure’ to treat nervousness,” Coyne said.

Black, who delved into the historical U.S. suicide data and did not identify a link, said it is not possible to extrapolate from this study and others on suicides during past epidemics, in part because they are so context-specific.

Several crisis lines report a surge in calls during the COVID-19 pandemic. Kids Help Phone is seeing an increase in conversations about suicide in Quebec and Atlantic Canada, said Alisa Simon, senior-vice president of innovation and chief youth officer. Stephanie MacKendrick, CEO of Crisis Services Canada, which runs a national network of distress lines, said there has been an uptick in “active rescues” by first responders — triggered when a caller is “at imminent risk of harm” or when there is a suicide in progress.

However, Black said crisis lines are not necessarily a bellwether for suicide rates, in part, because research has shown “by far and away, the majority of calls to ‘lifelines’ or ‘suicide distress lines’ ... are non-suicidal.”

“We don’t know what’s going to happen to suicide risk,” Black said. “But we do know that people who are underserved, underprivileged and disadvantaged are going to have tremendous problems in the next few months, and we need to support those people.”

These struggles are top-of-mind for Max FineDay, the executive director of Canadian Roots Exchange, which advocates for the advancement of reconciliation and the well-being of Indigenous youth.

“Indigenous young people are often underserved in almost every way imaginable. Because of that, we suffer. We are often at the bottom of every negative statistical index,” said FineDay, who is from Sweetgrass First Nation in Saskatchewan. “There’s going to be such a great and dire need for investment in mental health support.”

COVID-19 outbreaks in 23 First Nations prompt worries

The Canadian Press - May 1, 2020

<https://www.ctvnews.ca/canada/covid-19-outbreaks-in-23-first-nations-prompt-worries-1.4920181>

OTTAWA -- Federal officials say the next two weeks will be crucial in trying to determine the scope and severity of the spread of COVID-19 in First Nations communities.

Cases of the virus have begun to present within Indigenous communities across Canada, including the first case in Nunavut -- something health officials have been bracing for with concern, given the many vulnerabilities that exist among Indigenous populations.

Dr. Tom Wong, chief medical officer of public health at Indigenous Services Canada, says it's too early to determine the severity of these outbreaks and whether the situation will worsen. He said health officials are closely monitoring the situations and have jumped into action where needed.

Indigenous Services Minister Marc Miller noted a particular concern over an outbreak in the Dene village of La Loche, about 600 kilometres northwest of Saskatoon.

Conservative MP Gary Vidal, who represents the northern Saskatchewan riding where the village is located, said his concern is personal.

"This is my hometown, this is my area. These are families and kids that I coached in hockey and they're all friends and connections, so this has become very personal for me suddenly," Vidal told Miller during a House of Commons committee meeting Friday.

He noted the outbreak includes the deaths of two elders living in a care facility and that there are now also active cases in the neighbouring First Nation communities of English River and Clearwater River Dene.

"It's too late for reactive measures, now is the time for a major proactive response from (Indigenous Services Canada) in northern Saskatchewan. This has become a very dangerous situation," Vidal said.

Miller acknowledged he is "very worried" about this outbreak, and that his department has been working with the province and the Northern Inter-Tribal Health Authority to ensure a co-ordinated effort. Health Canada is mobilizing testing capacity, planning to ship personal protective equipment and sending in additional health professionals and medical officers. As of April 30, there were 131 active cases of COVID-19 in a total of 23 Indigenous communities across Canada, and federal officials are working closely with First Nations leaders, provinces and territories to help slow the spread of the virus.

Some of these outbreaks have been traced to workplaces. This includes an outbreak of COVID-19 at a meat-packing plant in Alberta, which has been identified as the source of new cases in the nearby Stoney Nakoda First Nation, west of Calgary, Wong said.

Health officials are once again stressing the importance of physical distancing and handwashing, and will be watching closely over the next two weeks in the hopes they see the current rise in cases on First Nations begin to curve downward, Wong said.

"What we are hoping to not see is an exponential increase. What we are hoping to see is a flattening of the curve," he said.

Meanwhile, Miller says the \$15 million in COVID-19 emergency funding earmarked to help organizations that service Indigenous urban populations is not "not enough."

Miller told the committee Friday his department received far more applications to this fund than the 94 proposals that have been approved.

He is now working to secure additional funds to help the vulnerable populations that friendship centres and other urban Indigenous organizations work to support every day.

"I will acknowledge that it is not enough and we are working more to serve these people in very vulnerable situations, and that's work we will continue to do," Miller said.

Last month, the National Association of Friendship Centres said their facilities across the country have been on the front lines of the crisis and have been inundated with requests for help as their communities struggle to cope.

The centres have been struggling to function without additional funds from the federal government as they work to meet an increased demand in services, the association said.

Numbers

Thunder Bay health unit confirms new case of COVID-19, bringing total to 71

CBC News – May 1, 2020

<https://www.cbc.ca/news/canada/thunder-bay/thunder-bay-health-unit-new-covid-19-1.5552712>

New case is a man in his 40s, who is located in an Indigenous community

The Thunder Bay District Health Unit (TBDHU) confirmed one new case of COVID-19 on Friday afternoon.

According to the health unit, the latest case is a male in his 40s, who is located in an Indigenous community. He is reportedly self-isolating and his exposure category is listed as "close contact" by the health unit.

As of Friday, the health unit reports that 71 cases of COVID-19 have been reported in the TBDHU catchment area. Of those, 18 are active and 51 are resolved.

If you think you may have COVID-19 symptoms or have been in close contact with someone who has it, first self-isolate and then use [Ontario's Self-Assessment Tool](#) to see if you need to seek further care.

There is now an [Online Portal to access COVID-19 test results](#) directly from the provincial laboratory system. This portal was launched April 12 by the Ontario government and offers fast and secure access to test results on your computer and mobile device, the TBDHU stated.

For additional information about COVID-19 and the TBDHU area, please see the [TBDHU website](#), social media channels or contact the TBDHU at (807) 625-5900 or 1-888-294-6630 .

Additional updates will also be provided as needed. More information can also be found by visiting this [Ontario government coronavirus website](#)

Canada takes baby steps toward normalcy; Quebec passes 2,000 COVID deaths

The Toronto Star – May 1, 2020

<https://www.thestar.com/news/canada/2020/05/01/covid-19-threat-to-first-nations-inuit-communities-grows-as-it-eases-elsewhere.html>

TORONTO - Canada took further baby steps toward post-pandemic normalcy on Friday as Atlantic provinces began easing rigid restrictions imposed to curb the COVID-19 scourge, while Quebec's death toll climbed past 2,000 as it set to ease its measures.

Elective surgeries and other non-urgent health-care services, including physiotherapy and optometry, restarted in Prince Edward Island, as did outdoor gatherings of up to five people from different households and non-contact outdoor recreational activities.

Nova Scotia reopened garden centres and nurseries, along with trails and provincial and municipal parks. It also allowed single families to head to their cottages. New Brunswick had already OK'd interactions between two families, a return to school for post-secondary students, as well as golfing, fishing and hunting.

Quebec, with the largest number of COVID-19 cases and deaths in Canada, was set to reopen retail stores outside Montreal on Monday, despite reporting 163 new COVID fatalities going into the weekend. The province also said it aimed to double testing — to 14,000 a day — by the end of next week.

Ontario, which reported 421 new cases and 39 more deaths, most in long-term care facilities, also said some workplaces and businesses can restart Monday. Those include garden centres with curb-side pickup, lawn-care and landscaping services, and automatic car washes.

“Our patience is paying off,” said Premier Doug Ford, who urged people to maintain physical distancing regardless. “We’re getting closer and closer to opening things up.”

Many non-essential businesses in Manitoba — retail stores and hair salons among them — are also set to open their doors on Monday.

The stiff stay-home restrictions that have idled much of the economy have plunged the country into a recession, according to a new report by the C.D. Howe Institute. Still, federal and provincial governments have called for a gradual and phased approach to a return to normalcy informed by public health concerns.

When it comes to reopening schools and child-care centres, Canada’s top public health officer, Dr. Theresa Tam, said distancing restrictions and strict cleaning were crucial for protecting adults who work in them, even if the virus appears to be less dangerous for the youngsters themselves.

Tam has also warned about the risk coronavirus disease poses to Indigenous communities, which are considered vulnerable due to often overcrowded living conditions and a lack of health-care services. To date, reserves have seen at least 129 cases and Inuit communities 16. Saskatchewan reported a jump of 26 cases, 19 of which were from in and around La Loche, a Dene village 600 kilometres northwest of Saskatoon.

What the government has been doing to prevent COVID-19 from ripping through the communities was the subject of a standing committee on Friday, with members of Parliament putting cabinet ministers on the hot seat. Indigenous Services Minister Marc Miller conceded the \$15 million in emergency funding earmarked to help organizations that service Indigenous urban populations was not enough.

The Senate, meanwhile, passed legislation authorizing \$9 billion worth of emergency financial support for students who can’t find or are unable to work this summer due to the pandemic. The bill received royal assent shortly thereafter.

Under the new Canada Student Emergency Benefit, eligible students will receive \$1,250 per month student benefit from May through August. Those with dependents or permanent disabilities will receive \$2,000 per month.

The contagious SARS-CoV-2 virus, which has now killed more than 3,220 people in Canada and 270,000 globally, is believed to have originated in China. U.S. President Donald Trump has

suggested Beijing withheld information about its epidemic from the World Health Organization and that the agency tried to cover up the initial outbreak.

Trump supporters have also pushed a conspiracy theory that the pandemic originated in a laboratory in Wuhan, China.

In Ottawa, Beijing's ambassador praised Canada's "cool-headed" co-operation in battling the spread of the disease. The United States, according to Ambassador Cong Peiwu, was "smearing" his country.

"To shift the blame, some U.S. politicians try to launch a stigmatization campaign against China," the envoy said. "Attacking and discrediting other countries will not save the time and lives lost."

In other developments, Newfoundland and Labrador has released 65 inmates under the public health emergency declared on March 18. So far, the province's jails have been COVID-free but at least 285 federal prisoners, one of whom has died, and 82 guards have tested positive.

In Chatham-Kent, Ont., police said someone hacked an online meeting for a local charity this week and broadcast child pornography to 200 participants.

-With files from Canadian Press staff across the country.

This report by The Canadian Press was first published May 1, 2020.

Walpole Island First Nation sets up medical tent, hands out supplies amid outbreak in community

CBC News – May 1, 2020

<https://ca.news.yahoo.com/walpole-island-first-nation-sets-124353125.html>

A medical tent has been set up as an option for self-isolation, after members of Walpole Island First Nation tested positive for COVID-19.

Council said the tent — set up in the parking lot of the arena — was established by the community's emergency control group and council as an "options for isolation facilities" for members who don't want to put others at risk.

In a Facebook post, the Walpole Island First Nation Council said "our hope is that the number of cases that we have stays low and we don't need to use the tent, but it is important that we are prepared in case the need arises."

Earlier in the week, five people tested positive for the disease less than one week after Chief Dan Miskokomon announced the community's first two cases.

Walpole Island First Nation Coun. Ron Soney made the announcement through a Facebook video on Wednesday, saying that a total of 14 community members have been tested for coronavirus.

Soney said seven people had tested negative, while two people were waiting for their results.

On Thursday, council said they would pass out hand sanitizer and masks on the weekend. Gloves have been ordered and will be delivered soon, as well.

Council said they were not aware of any Walpole Island First Nation employees that have been working while positive with COVID-19, and no buildings have been compromised.

Walpole Island First Nation restricted access to non-residents in early April to prevent the spread of COVID-19.

Council said anyone with questions or concerns can call the Walpole Island First Nation Health Centre at 519-627-0765.

COVID-19 outbreaks in 23 First Nations prompt worries

CTV – May 1, 2020

<https://www.ctvnews.ca/canada/covid-19-outbreaks-in-23-first-nations-prompt-worries-1.4920181>

OTTAWA -- Federal officials say the next two weeks will be crucial in trying to determine the scope and severity of the spread of COVID-19 in First Nations communities.

Cases of the virus have begun to present within Indigenous communities across Canada, including the first case in Nunavut -- something health officials have been bracing for with concern, given the many vulnerabilities that exist among Indigenous populations.

Dr. Tom Wong, chief medical officer of public health at Indigenous Services Canada, says it's too early to determine the severity of these outbreaks and whether the situation will worsen.

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He said health officials are closely monitoring the situations and have jumped into action where needed.

Indigenous Services Minister Marc Miller noted a particular concern over an outbreak in the Dene village of La Loche, about 600 kilometres northwest of Saskatoon.

Conservative MP Gary Vidal, who represents the northern Saskatchewan riding where the village is located, said his concern is personal.

"This is my hometown, this is my area. These are families and kids that I coached in hockey and they're all friends and connections, so this has become very personal for me suddenly," Vidal told Miller during a House of Commons committee meeting Friday.

He noted the outbreak includes the deaths of two elders living in a care facility and that there are now also active cases in the neighbouring First Nation communities of English River and Clearwater River Dene.

"It's too late for reactive measures, now is the time for a major proactive response from (Indigenous Services Canada) in northern Saskatchewan. This has become a very dangerous situation," Vidal said.

Miller acknowledged he is "very worried" about this outbreak, and that his department has been working with the province and the Northern Inter-Tribal Health Authority to ensure a co-ordinated effort. Health Canada is mobilizing testing capacity, planning to ship personal protective equipment and sending in additional health professionals and medical officers.

As of April 30, there were 131 active cases of COVID-19 in a total of 23 Indigenous communities across Canada, and federal officials are working closely with First Nations leaders, provinces and territories to help slow the spread of the virus.

Some of these outbreaks have been traced to workplaces. This includes an outbreak of COVID-19 at a meat-packing plant in Alberta, which has been identified as the source of new cases in the nearby Stoney Nakoda First Nation, west of Calgary, Wong said.

Health officials are once again stressing the importance of physical distancing and handwashing, and will be watching closely over the next two weeks in the hopes they see the current rise in cases on First Nations begin to curve downward, Wong said.

"What we are hoping to not see is an exponential increase. What we are hoping to see is a flattening of the curve," he said.

Meanwhile, Miller says the \$15 million in COVID-19 emergency funding earmarked to help organizations that service Indigenous urban populations is not "not enough."

Miller told the committee Friday his department received far more applications to this fund than the 94 proposals that have been approved.

He is now working to secure additional funds to help the vulnerable populations that friendship centres and other urban Indigenous organizations work to support every day.

"I will acknowledge that it is not enough and we are working more to serve these people in very vulnerable situations, and that's work we will continue to do," Miller said.

Last month, the National Association of Friendship Centres said their facilities across the country have been on the front lines of the crisis and have been inundated with requests for help as their communities struggle to cope.

The centres have been struggling to function without additional funds from the federal government as they work to meet an increased demand in services, the association said.