



March 1, 2021

**To:** Premier Doug Ford  
Christine Elliott, Deputy Premier, Minister of Health

**Cc:** General (Ret.) Rick Hillier, COVID-19 Vaccine Distribution Task Force  
Dr. Dirk Huyer, Coordinator, Provincial Outbreak Response  
Dr. David Williams, Chief Medical Officer of Health  
Alison Blair, Associate Deputy Minister, Pandemic Response and Recovery  
Patrick Dicerri, Assistant Deputy Minister  
Nadia Surani, Acting Director, Primary Care Branch  
Loretta Ryan, Executive Director, Association of Local Public Health Agencies

**Re: Ensuring Equity in Ontario's Vaccination Campaign**

Dear Premier Ford and Minister Elliott,

We are writing today as your partners in Ontario's vaccination rollout plan. We have appreciated the opportunity to consult with the vaccine task force regularly over the last several months, and the recent meetings with Ret. General Hillier. We are encouraged by the leadership role of Public Health Units in the vaccine rollout, and know that health equity is a key consideration in General Hillier's communications and in regional plans to ensure an efficient, equitable access to COVID-19 vaccines. **Our health professionals and teams stand ready to support #TeamVaccine in Ontario.**

As has been seen and talked about for some time among public health units, in media stories, and among community providers at the front lines of testing and community supports, COVID-19's effects have not been felt equally in Ontario. We know that communities who've seen the highest rates of infections during the pandemic, the highest impacts on health and wellbeing, have been communities already marginalized before the pandemic hit, and for whom health and social services can be more difficult to access. **We also know that it's many of these people who will have difficulty accessing online or phone system booking, are home bound, or are otherwise hesitant or unable to visit mass vaccination clinics or pharmacies.** Premier and Minister, we believe it is critical to have a plan to ensure that the people facing the most barriers and risks due to COVID-19 are given particular attention in vaccine plans.

The good news is that throughout the pandemic, community health leaders and their partners have worked hard to build lines of trust, and to work with other community leaders, local ambassadors and others to ensure that their services, including testing and isolation supports, could reach people marginalized due to a variety of factors.

**From the experience of implementing COVID-19 testing, we know that one-size-fit-all mass vaccination clinics, even if accessibly located within priority neighbourhoods, will not be effective by themselves. Mobile testing clinics that deliver testing to the door, and smaller testing sites located in trusted community spaces, performed by trusted organizations, have been the keys to success.** These lessons can be applied to ensure a successful and equitable rollout of the COVID-19 vaccination campaign.

**Premier and Minister, we ask for your leadership in supporting all Public Health Units across Ontario to work with primary care to include and implement the following in the regional vaccination rollout:**

1. A comprehensive, multilingual, and culturally safe approach to addressing vaccine hesitancy and building vaccine confidence in communities where distrust and marginalization, as well as language and social barriers can play a role in vaccine uptake, by partnering with and resourcing community organizations that have existing lines with trust and have already been supporting COVID-19 response in these priority neighbourhoods. This might mean flyers in building lobbies, door-to-door visits, local language radios, leveraging faith leaders, and other high touch strategies that have already been used during testing and isolation campaigns in the hardest hit communities.
2. A multi-pronged approach that builds access to the vaccine into existing partnerships, mobile units, community testing sites, and pop-up community campaigns with priority populations. This may include innovative solutions that were successful for testing, such as repurposing public buses to set up vaccination clinics outside of seniors' residences, social housing, and isolated areas within the hardest hit postal codes.
3. Collection, review, and reporting of race-based and socio-demographic data as the rollout takes place across marginalized communities to ensure that the people who are at the highest risk are being helped first by the vaccine, and to prevent future outbreaks. This type of collection and reporting will enable healthcare and community providers to know which of their clients require additional outreach immediately, and inform a more just and equitable system going forward.

We have come this far together, building on the strength of individual, tailored community outreach and supports to help reduce the risk of further outbreaks in the hardest hit areas of Ontario's most marginalized communities. To get Ontario back on its feet, and begin the recovery we all so desperately want to see, we have to start with those who've been pushed the furthest down by this pandemic. Mass vaccination sites alone, however well placed or advertised using social media and traditional advertising buys will only take us so far.

We have to help those at the greatest risk through community approaches that have proven to be successful. We have seen in other jurisdictions, particularly in the United States, that without a coordinated plan to reach the hardest hit communities, vaccination rates in postal codes with the highest number of outbreaks are often the ones with the lowest vaccination rates. We have a chance to write a different story here in Ontario. Together, we can do it.

Sincerely,

Sarah Hobbs, CEO  
Alliance for Healthier Communities

Leanne Clark, CEO  
Ontario College of Family Physicians

Kavita Mehta, CEO  
Association of Family Health Teams of Ontario

Anthony Dale, CEO  
Ontario Hospital Association

Dana Cooper, Executive Director  
Nurse Practitioners Association of Ontario

Dr. Samantha Hill, President  
Ontario Medical Association

Jennifer Clement, CEO  
Nurse Practitioner-Led Clinic Association

Dr. Alykhan Abdulla, Chair  
Section on General and Family Practice  
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