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TRAINING & RESOURCES

Introduction to race, income, and language data collection

30 June 2020

2:30 pm – 3:30 pm

Indigenous Land Acknowledgement

- This webinar is being hosted and recorded in Toronto on the traditional territory of many First Nations, including the Mississaugas of the Credit, the Anishnabeg, the Chippewa, the Haudenosaunee and the Wendat peoples.
- We also recognize the enduring presence of many diverse First Nations, Inuit and Métis peoples across the regions to which this webinar is being delivered.

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Disclosure of conflicts and commercial support

- None of the team members for this session have received support or in-kind support from a commercial sponsor
- None of the team members have potential conflicts of interest to declare
- One of the authors Caroline Bennett AbuAyyash previously worked at Sinai Health System in the implementation of demographic data collection across the Toronto Central LHIN hospitals and Community Health Centres

Disclaimer

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POLL

- Where are you calling from?
- Where do you work?
- Please indicate your current experience in socio-demographic data collection

AGENDA

Time	Item
02 minutes	Welcome & Indigenous Land Acknowledgement
05 minutes	Why Collect Socio-demographic Data?
05 minutes	Health Equity Principles
08 minutes	What Data are Being Collected?
20 minutes	TOTAL TIME

Objectives

After completing this webinar participants will be able to:

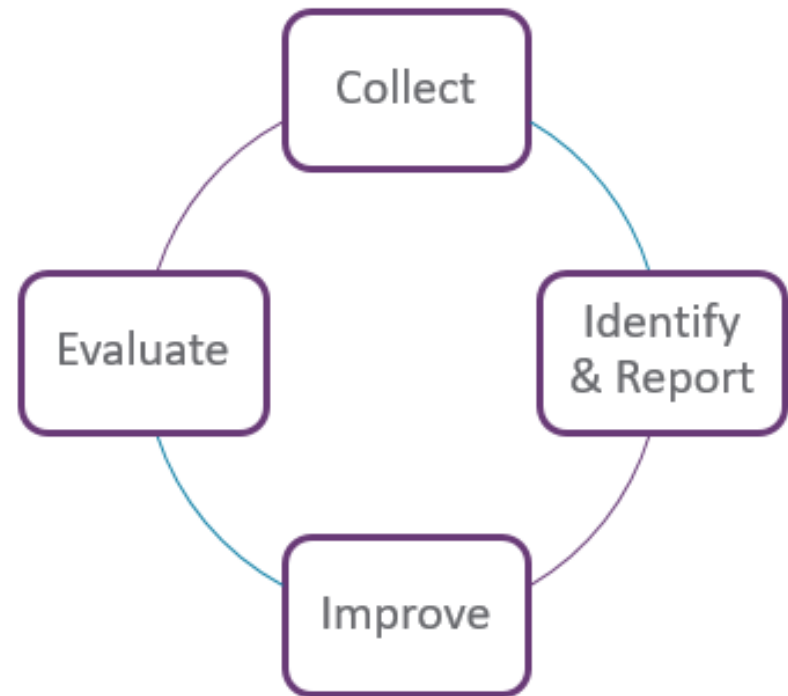
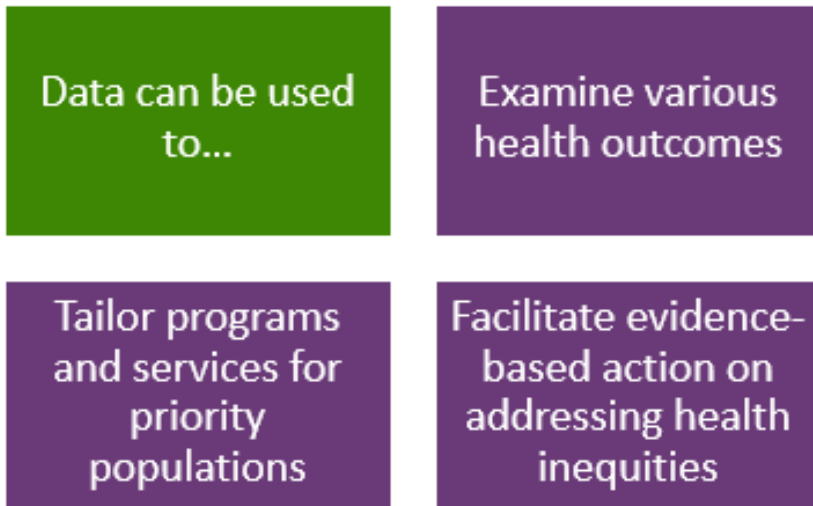
- Describe why demographic questions on race, income and language are important for health equity
- Define health equity principles
- Understand the Canadian context for health equity
- Describe the new iPHIS questions on race, income, and language



Why Collect Socio-demographic Data?

We cannot manage what we do not measure¹

Framework for data-driven equitable health care²



What do we know already? Data from the 2009 H1N1 pandemic

Persons who lived in high deprivation neighbourhoods & had low education in Ontario³

- Higher hospitalization rates than people who lived in other communities

Infection rates compared to the general population in Ontario⁴

- East and South East Asian populations 3x higher
- South Asian populations 6x higher
- Black populations 10x higher

Indigenous peoples⁵

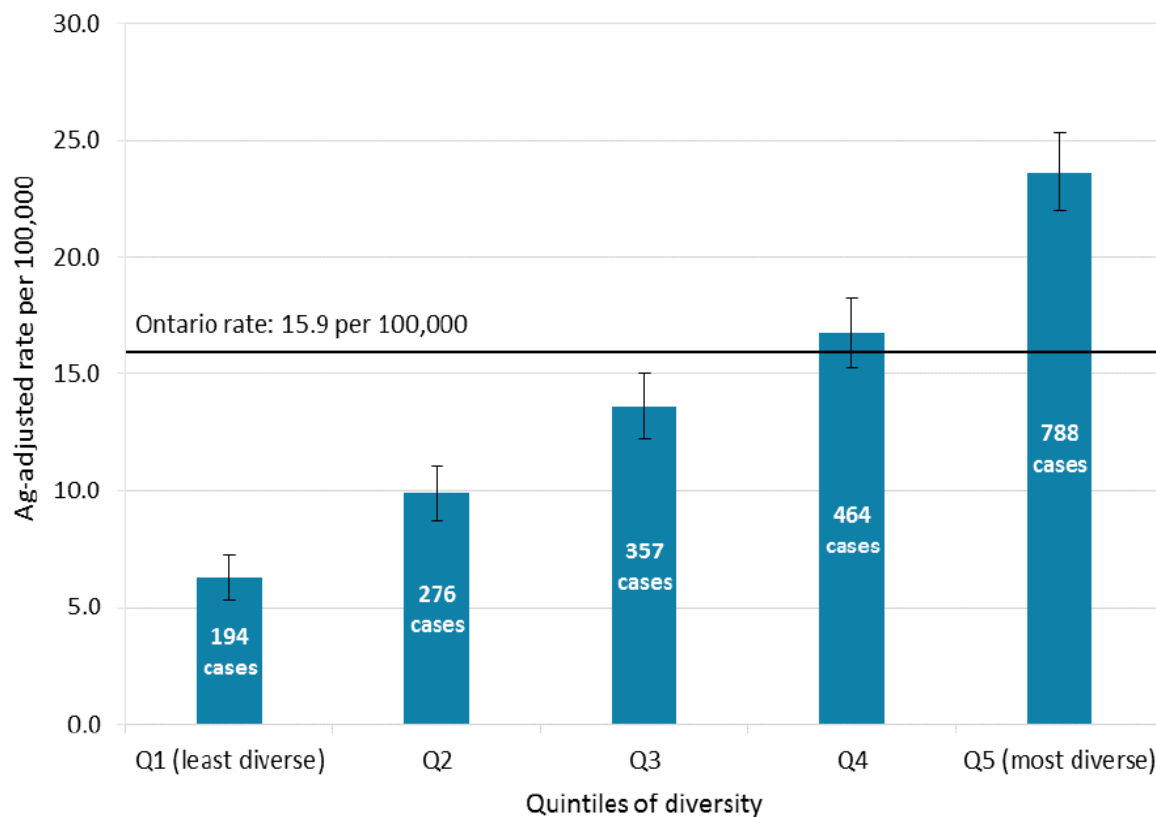
- Represented 30% of first wave hospitalizations
- Represented 20% of total mortality

COVID-19 in Ontario: Neighbourhood-level diversity⁶

COVID-19 Age-adjusted rate and number of hospitalizations

Neighbourhoods with the highest ethnic concentration

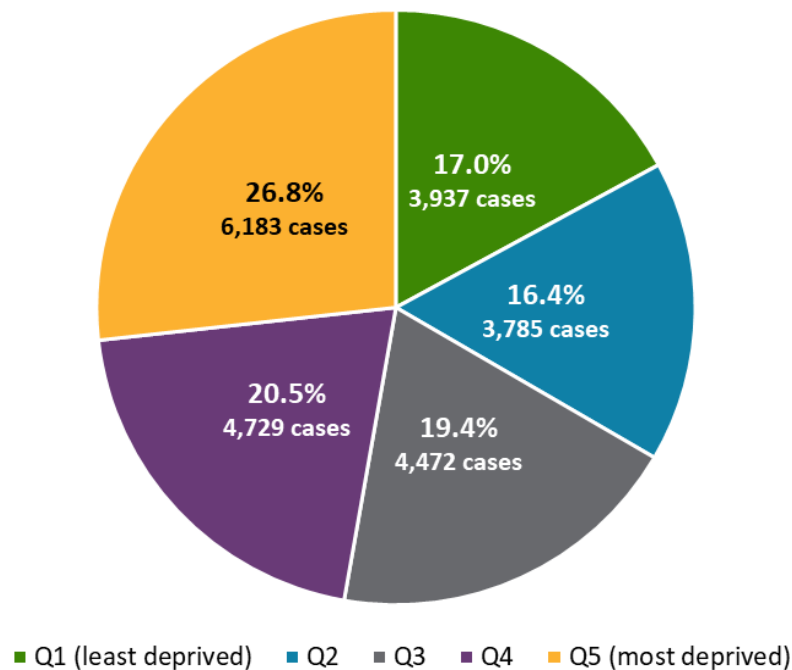
- Higher percentage of confirmed positive COVID-19 tests
- Over 2x higher hospitalization rates



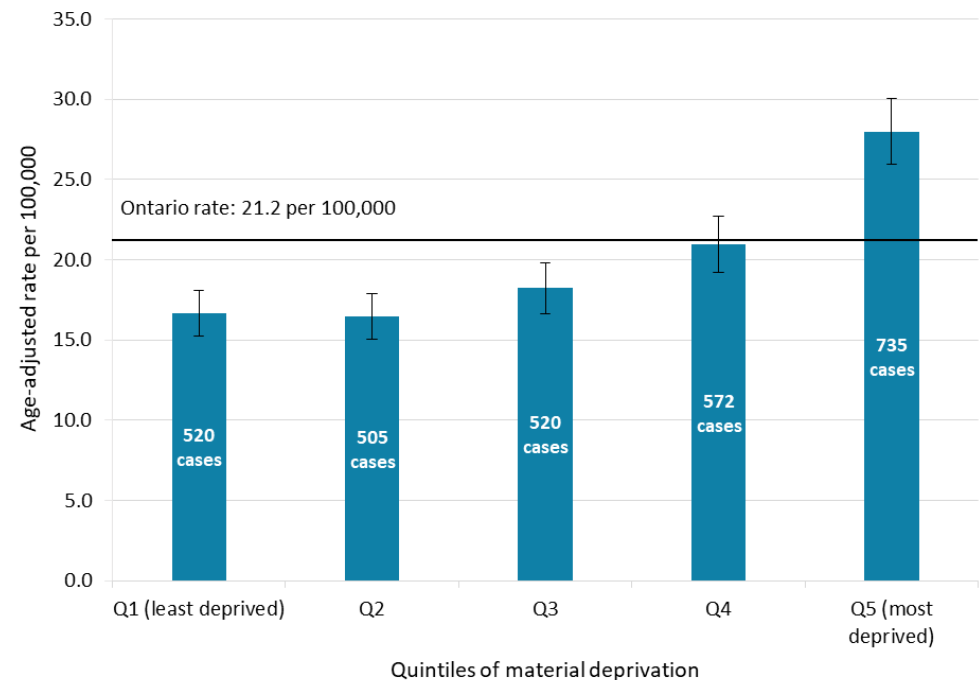
COVID-19 in Ontario: Focus on material deprivation⁷

(15 Jan 2020 – 03 June 2020)

Percent and number of confirmed cases of COVID-19 for each quintile of material deprivation: Ontario



Age-adjusted rate and number of hospitalizations among confirmed cases of COVID-19 for each quintile of material deprivation: Ontario



Language

Language as determinant of care/outcomes⁸

- Language barriers are linked to detrimental impacts on client/patient experiences, service provision, and health outcomes

Language considerations in Ontario⁹

- Research suggests that language barriers may be an issue across multiple municipalities in Ontario



Health Equity Principles

Health equity¹⁰

Health equity means that all people can reach their full health potential without disadvantage due to social position or other socially determined circumstance

Health inequities

Health differences that are¹⁰:

Systematic

Unfair and unjust

Avoidable

Social determinants of health¹¹



What is the primary determinants of people's health¹²?

In Canada, 50% of our health are shaped by social determinants including: income, education, social safety net, working conditions, race, and gender, followed by 25% due to health care access and wait times

Determinants of Indigenous health¹³

Proximal Determinants

'Surface' level factors

- Health care availability/access
- Physical environment
- Health behaviour

Intermediate Determinants

Underlying and persistent factors

- Community infrastructure and relationships
- Kinship networks
- Knowledge sharing

Structural Determinants

Historical, political, ideological, economic, and social foundations/systems

- Colonialism, Indian act, residential schools, systemic racism
- Indigenous world views, spirituality, and resilience

Building blocks of health equity¹⁴

- Recognise Indigenous peoples' inherent rights and sovereignty and right to self-determination
- Understand Canada's colonial history and its ongoing impacts

Anti-colonialism

- Identify, remove, prevent, and mitigate the racially inequitable outcomes and power imbalances

Anti-Racism

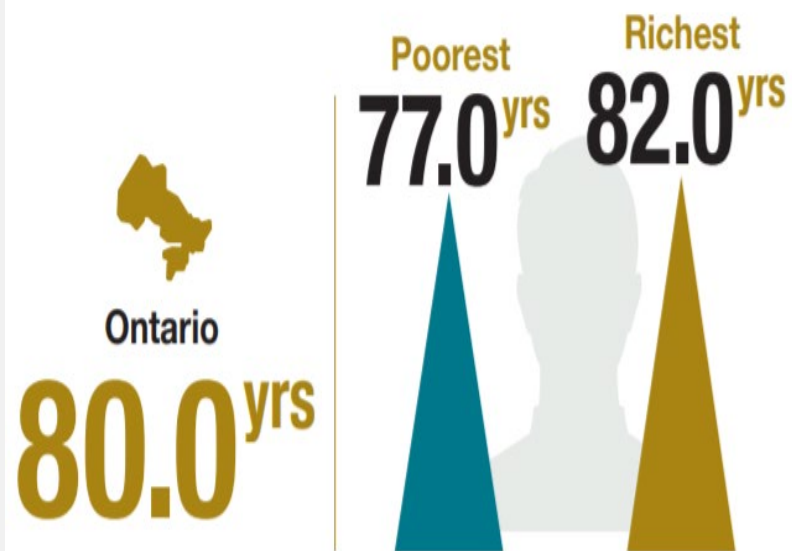
- When institutions or systems create or maintain racial inequity

Systemic racism lens

Health inequities in Ontario¹⁵

LIFE EXPECTANCY (MEN)

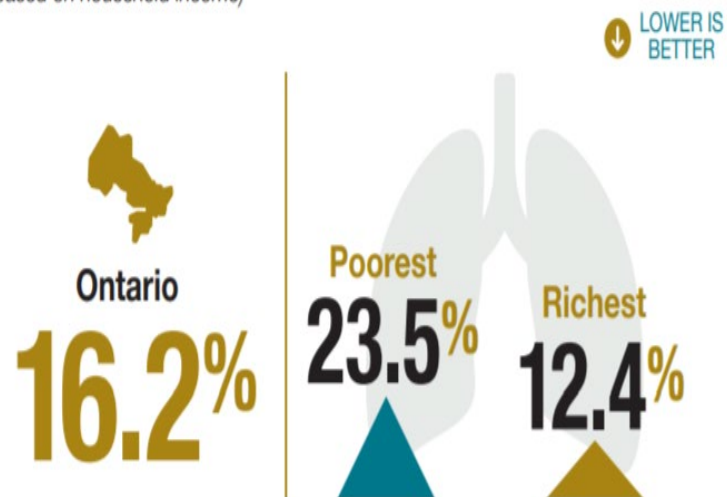
(based on neighbourhood income)



MULTIPLE CHRONIC CONDITIONS¹

Percentage of the population aged 12 and older who report having multiple chronic conditions

(based on household income)





What Data are being collected?

- **Key messages**
- **Introduce the questions**
- **Data entry**

Purpose, consent, privacy¹⁴

Purpose

- Goal of collecting race, income, and language information is to improve health
- Identify which communities are disproportionately impacted, what kinds of supports we should consider, if our programs are working

Collection

- Authority to collect alongside the other case investigation questions as per routine public health unit practices
- Individuals can choose not to answer any or all of these questions

Privacy

- Information is collected under *Health Protection and Promotion Act* O.Reg. 569
- Information is protected by the Personal Health Information Protection Act
- Information is used and disclosed as permitted/required by law
- Information is stored in a secure government data centre

RACE¹⁴

In our society, people are often described by their race or racial background. For example, some people are considered “White” or “Black” or “South Asian”, etc.

Which race category best describes you? Select all that apply from the options I will read out:

	Description/example		Description/example
Black	African, Afro-Caribbean, African-Canadian descent	Middle Eastern	Arab, Persian, West Asian descent, e.g. Afghan, Egyptian, Iranian, Lebanese, Turkish, Kurdish, etc.
East/Southeast Asian	Chinese, Korean, Japanese/Filipino, Vietnamese, Cambodian/other East or Southeast Asian descent	South Asian	South Asian descent, e.g. East Indian, Pakistani, Bangladeshi, Sri Lankan, <u>IndoCaribbean</u> , etc.
Latino	Latin American, Hispanic descent	White	European descent
Don't know		Another race category	
Prefer not to answer			

INDIGENEITY

What about collecting Indigeneity data?

- To address health inequities faced by Indigenous Peoples, the Ministry of Health continues to work with Indigenous partners
- This engagement aims to identify whether and how collecting information about Indigenous identity will lead to meaningful change in program and service delivery and health outcomes

INCOME¹⁶

Income can come from various sources such as from work, investments, pensions or government.

What was your total household income before taxes in 2019? Select one from the list of income ranges I will read out:

0 - \$29,999

\$30,000-\$49,999

\$50,000-\$69,999

\$70,000-\$99,999

\$100,000-149,999

\$150,000 or more

Do not know

Prefer not to answer

Including yourself, how many family members live in your household?

_____ (people)

- Do not know - Prefer not to answer

LANGUAGE¹⁷

In order to understand language profiles of our clients/patients, we are going to ask you two questions on language

What is the language that you first learned at home in childhood and still understand?

Drop down list of languages already in iPHIS

Do not know

Prefer not to answer

In which of Canada's official languages, English or French, are you most comfortable?

English

Neither

French

Do not know

Both English and French

Prefer not to answer

iPHIS data entry

- Public health units are now able report this information in iPHIS for Outbreak Module cases where the Disease is selected as “CORONAVIRUSES CAUSING SEVERE ACUTE RESPIRATORY ILLNESS”.
- To enter this information, navigate to the *Risks* screen for a COVID-19 case, under the **Behavioural Social Factors** section. The following screen shots show the risk factors and relevant drop down menus available for selection.

Risks screen

- Navigate to Cases > Case > Risks.

Home • Client Search • Wait Queue • Scheduling • To Do's • Lab • Site Map • Help • About • Logoff

Outbreak Management

Outbreak Number: 0000-2020-001
Outbreak Type: RESPIRATORY / DIRECT CONTACT - COMMUNITY
Health Unit Responsible: MOHLTC - PHD (0)
Primary Disease: CORONAVIRUSES CAUSING SEVERE ACUTE RESPIRATORY ILLNESS

Outbreak Name: COVID-19 - ONTARIO - 2020 01 30
Outbreak Status: OPEN
Reported Date:

Case ID: 1215483 **Client Name:** CLIENT , FAKE **Client ID:** 2383103 **Date of Birth:** 1970-06-26 [Details](#)

Episode Date: 2020-06-26 **Episode Date Type:** REPORTED

[Contacts](#) | [Cases](#) | [Exposures](#) | [Supply Orders](#)

SES - INCLUDING YOURSELF, HOW MANY FAMILY MEMBERS LIVE IN YOUR HOUSEHOLD?

SES - WHICH RACE CATEGORY BEST DESCRIBES YOU? SELECT ALL THAT APPLY:

- DO NOT KNOW
- PREFER NOT TO ANSWER
- BLACK
- EAST/SOUTHEAST ASIAN
- LATINO
- MIDDLE EASTERN
- SOUTH ASIAN
- WHITE
- ANOTHER RACE CATEGORY (PLEASE SPECIFY)

SES - WHAT WAS YOUR TOTAL HOUSEHOLD INCOME BEFORE TAXES IN 2019? SELECT ONE:

SES - WHAT IS THE LANGUAGE THAT YOU FIRST LEARNED AT HOME IN CHILDHOOD AND STILL UNDERSTAND?

- DO NOT KNOW
- PREFER NOT TO ANSWER

SES - IN WHICH OF CANADA'S OFFICIAL LANGUAGES, ENGLISH OR FRENCH, ARE YOU MOST COMFORTABLE?

[Notes](#) [Notes](#) [Notes](#) [Notes](#) [Notes](#) [Notes](#) [Notes](#) [Notes](#) [Notes](#) [Notes](#) [Notes](#) [Notes](#) [Notes](#) [Notes](#) [Notes](#) [Notes](#) [Notes](#) [Notes](#) [Notes](#) [Notes](#)

Risks screen, cont.

- SES – Including yourself, how many family members live in your household?

SES - INCLUDING YOURSELF, HOW MANY FAMILY MEMBERS LIVE IN YOUR HOUSEHOLD?

DO NOT KNOW
PREFER NOT TO ANSWER

- SES – Which race category best describes you? Select all that apply:

SES - WHICH RACE CATEGORY BEST DESCRIBES YOU? SELECT ALL THAT APPLY:

-DO NOT KNOW	<input type="checkbox"/>
-PREFER NOT TO ANSWER	<input type="checkbox"/>
-BLACK	<input type="checkbox"/>
-EAST/SOUTHEAST ASIAN	<input type="checkbox"/>
-LATINO	<input type="checkbox"/>
-MIDDLE EASTERN	<input type="checkbox"/>
-SOUTH ASIAN	<input type="checkbox"/>
-WHITE	<input type="checkbox"/>
-ANOTHER RACE CATEGORY [PLEASE SPECIFY]	<input type="checkbox"/>

Risks screen, cont.

- SES – What was your total household income before taxes in 2019?
Select One:

SES - WHAT WAS YOUR TOTAL HOUSEHOLD INCOME BEFORE TAXES IN 2019? SELECT ONE:

<input type="checkbox"/>	\$0 - \$29,999
<input type="checkbox"/>	\$30,000 - \$49,999
<input type="checkbox"/>	\$50,000 - \$69,999
<input type="checkbox"/>	\$70,000 - \$99,999
<input type="checkbox"/>	\$100,000 - \$149,999
<input type="checkbox"/>	\$150,000 OR MORE
<input type="checkbox"/>	DO NOT KNOW
<input type="checkbox"/>	PREFER NOT TO ANSWER

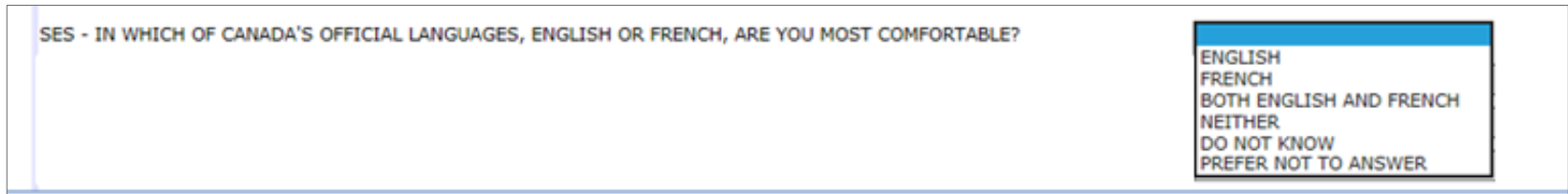
- SES – What is the language you first learned at home in childhood and still understand?

SES - WHAT IS THE LANGUAGE THAT YOU FIRST LEARNED AT HOME IN CHILDHOOD AND STILL UNDERSTAND?

<input type="checkbox"/>	-DO NOT KNOW
<input type="checkbox"/>	-PREFER NOT TO ANSWER
<input type="checkbox"/>	ENGLISH
<input type="checkbox"/>	FRENCH
<input type="checkbox"/>	ARABIC
<input type="checkbox"/>	CHINESE - CANTONESE
<input type="checkbox"/>	CHINESE - HAKKA
<input type="checkbox"/>	CHINESE - MANDARIN
<input type="checkbox"/>	DUTCH
<input type="checkbox"/>	GERMAN
<input type="checkbox"/>	GREEK
<input type="checkbox"/>	ITALIAN
<input type="checkbox"/>	POLISH
<input type="checkbox"/>	PORTUGUESE
<input type="checkbox"/>	PUNJABI
<input type="checkbox"/>	SPANISH
<input type="checkbox"/>	TAGALOG

Risks screen, cont.

- SES – In which of Canada’s official Languages, English or French, are you most comfortable?



SES - IN WHICH OF CANADA'S OFFICIAL LANGUAGES, ENGLISH OR FRENCH, ARE YOU MOST COMFORTABLE?

ENGLISH
FRENCH
BOTH ENGLISH AND FRENCH
NEITHER
DO NOT KNOW
PREFER NOT TO ANSWER

- Please see the iPHIS Special Notice distributed on June 27 for more information on the updates in iPHIS.
- The updated COVID-19 iPHIS Data Entry Guide also includes directions on entering data in iPHIS for the new socioeconomic and sociodemographic factors.

Wrap up reminder: A health equity perspective¹⁸

- Embed health equity in practice
- Reflect on world view, assumptions and beliefs
- Be open, non-judgemental
- Ground work in mindfulness: paying attention, being purposeful and intentional
- Building rapport can be the start of having a conversation and asking about socio-demographic information

For more information

- Resources

- **Guide: [Race and income data collection script & FAQ](#)**

Document developed by Public Health Ontario to provide health units with a script, tips, and FAQ when collecting race and income data

- **Report: [Ontario's Anti-Racism Standards](#)¹⁴ (follow link)**

Report that outlines and established standards to help identify and monitor systemic racism and racial disparities within the public sector

- **Website: [Torontohealthequity.ca](#)¹⁹ (follow link)**

Website that includes a data collection guide, videos, tips on asking questions, patient/client resources, and more

POLL

- What would be the main barrier to successfully collecting socio-demographic in your organization? (open-ended)

Q&A

- We're opening the session to a Q&A discussion



Chat box:

Submit questions in chat box

POLL



I'd like another webinar to be on... (choose up to 3):

- Applying equity principles to data analysis/interpretation
- Community engagement around data collection and use
- Data collection methods and workflows
- Further knowledge exchange with health units
- How to respond to racism and harmful language during data collection
- Other (please specify)

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