



Information Note

Advice to Deputy Minister Shannon Baskerville

Date: 2020-11-25

Cliff#: 120204

Issue: Preliminary analysis of COVID-19 impact on Fall 2020 enrolment in public post-secondary system

Background / Facts:

- The Ministry is continuing to monitor the impact of COVID-19 on the public post-secondary system. Understanding the impact on enrolment remains of critical importance to informing government's recovery and response priorities.
- To this end, the Ministry worked proactively with sector partners to coordinate an early submission of preliminary Fall 2020 headcount enrolment data (received November 16, 2020).
- Overall, preliminary enrolment data show a decline in headcount enrolment of 3% for the public post-secondary system, compared to an increase of 1.5% in the previous period.
- The impact appears particularly pronounced for International students (-8%) but there have also been some impacts to domestic enrolment (-1%).
- Trends for Okanagan College reported in a recent news article align with preliminary data available to the Ministry for that institution.

Analysis:

- Early indications show that Fall 2020 enrolment [s.12; s.13](#) [s.12; s.13](#) reflecting relatively stable domestic enrolment and some impacts to international student enrolment.
- While work is still underway to investigate impacts of COVID-19 on enrolment, early analysis reveals variable impacts by sector:
 - Colleges & Institutes – decreased domestic (-7%) and international enrolment (-15%).
 - Teaching Universities – decreased domestic (-2%) and international enrolment (-10%).
 - Research Universities – increased domestic (+3%) and decreased international enrolment (-2%).
- Work in progress is expected to help the Ministry better understand how the COVID-19 pandemic is impacting public post-secondary system. In particular:
 1. Additional analysis will provide additional insight into whether sectors, regions, and subpopulations within the student body have been disproportionately impacted.
 2. Preliminary Full-Time Equivalent (FTE) enrolment data is expected to contextualize the preliminary headcount enrolment data further, providing insight into the degree to which students have had to shift to more part-time studies.
 3. Preliminary Fall enrolment data will help to refine previous enrolment projections to help understand impact on the system as a whole and which institutions may be most effected in the short to medium term.

Conclusion & Next Steps:

- Early analysis of preliminary data indicates relatively stable domestic enrolment and some negative impact to international student enrolment.
- More work is required to better understand the impacts of COVID-19 – particularly variability in impact across a range of factors, and the degree to which preliminary headcount enrolment differs from preliminary reports of FTE enrolment (pending).
- The Research & Analytics unit will continue to work on:
 1. analyzing impacts on enrolment by region, institution, program, gender age, Aboriginal identity, and country of origin for international students.
 2. obtaining preliminary FTE enrolment data from Post-Secondary Finance in order to compliment the information available on headcount enrolment.
 3. updating projection scenarios established in the summer factoring in preliminary Fall 2020 enrolment data.
- The Research & Analytics unit will work with institutions to obtain necessary context for outliers observed while completing the analysis described above.

Contact: *Chelsea Chalifour (Executive Director) Governance, Accountability and Analytics, 250 216-0452*

Meeting Note

Advice to Deputy Minister Shannon Baskerville

Date: November 16, 2020

Cliff #: 120125

Prepared for: Shannon Baskerville, Deputy Minister

Date, Time of Meeting and Location:

- Thursday, November 19th from 4:15 – 5:00 pm (Videoconference)

Attendees: (full names, title, office)

- Don Wright, Deputy to the Premier and Cabinet Secretary, PREM
- Dr. Bonnie Henry, Provincial Health Officer, HLTH
- Shannon Baskerville, Deputy Minister, AEST
- Allison Bond, Deputy Minister, MCFD
- Doug Caul, Deputy Minister, MIRR
- Richard Fyfe, Deputy Attorney General, AG
- David Galbraith, Deputy Minister, SDPR
- Kevin Jardine, Deputy Minister, ENV
- Christine Kennedy, Deputy Minister, JEDC
- Jill Kot, Deputy Minister, CITZ
- Kaye Krishna, Deputy Minister, MAH
- Scott MacDonald, Deputy Minister, EDUC
- Neilane Mayhew, Deputy Minister, MMHA
- Lori Wanamaker, Deputy Minister, FIN
- Mark Sieben, Deputy Solicitor General, PSSG

Issue(s):

- The BC Centre for Disease Control and the Office of the Provincial Health Officer are engaging with partners and stakeholders to identify and take action on unintended consequences of the COVID-19 response (**see attached presentation**).

Background:

- Multiple measures were implemented to slow the spread of COVID-19 including physical distancing, suspension of in-class learning in K-12, temporary closures of non-essential businesses, and limiting gatherings to no more than 50 people.

- The Unintended Consequences Working Group was established in April 2020 at the request of Public Health Leadership¹ to identify, monitor and report on the unintended consequences of COVID-19 response measures on the health and wellness of the population including mental/physical health, social, economic and environmental impacts.
- The Working Group subsequently identified a need for a cross-government Executive Director Task Group to ensure cross-sector collaboration and input in the development of well-rounded unintended consequences reports.
 - The first meeting of the Task Group is anticipated in early December 2020.
 - Jeanne Sedun has been identified as the AEST representative on the Task Group.

Discussion:

- 59 unintended consequences have been identified to date by the Working Group in 8 areas.
 - A framework has been developed to prioritize consequences based on impact and urgency.
 - 33 of the 59 items have been identified as Tier 1 (requiring immediate action).
- Topics related to the post-secondary sector include:
 - Mental health (e.g. population mental distress; service utilization);
 - School connectedness and educational disparities;
 - Social and community impacts (e.g. gender-based violence; stigma, intolerance and racism; Indigenous peoples cultural connectedness/wellness);
 - Health care services (e.g. virtual health options; health sector human resources); and,
 - Economic (e.g. unemployment / underemployment; workforce for essential services).
- The Working Group plans to engage stakeholders and Indigenous partners to identify any additional unintended consequences and to inform actions that can be taken to mitigate harms and leverage benefits.

Attachment: *Att 1 - BCCDC UniCon for Grand Rounds*

Contact: *Kevin Brewster, ADM (250-952-7410)*

¹ Public Health Leadership for BC includes the public health physician leads in the five regional health authorities, as well as the First Nations Health Authority, the BC Centre for Disease Control and the Office of the Provincial Health Officer.



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Unintended Consequences of the COVID-19 Response

Jason Wong and Brian Emerson,
On behalf of the UniCon Working Group

BCCDC Grand Rounds
September 22, 2020

Territorial Acknowledgement

We respectfully acknowledge that we live, work and play on the unceded traditional territories of the Coast Salish peoples – Sk̓w̓x̓w̓ú7mesh (Squamish), Sel̓il̓witulh (Tsleil-Waututh), x̓m̓əθk̓w̓əy̓əm (Musqueam) and the Lekwungen Peoples, specifically the Songhees and Esquimalt First Nations.

Outline

1. Background on Unintended Consequences
2. Identifying Unintended Consequences
3. Prioritization of Unintended Consequences
4. Describing Unintended Consequences
5. Plan for Engagement
6. Communications Plan



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1. Background

Background

- Multiple measures were implemented to prevent and slow the spread of COVID-19
 - Physical distancing
 - Suspension of in-class learning
 - Temporary closures of non-essential businesses
 - Limiting gatherings to no more than 50 people
- Measures limited the spread of COVID-19, but these measures had other effects (i.e. unintended consequences)

Unintended Consequences

- Public health and other COVID-19 response measures have had harms (**negative** unintended consequences)
- Some **positive** consequences or benefits have also emerged and identifying and tracking them will aid in leveraging those benefits now and in the future.
- Recognizing and monitoring the unintended consequences that have occurred and to whom will help inform action to mitigate harms and amplify benefits

Unintended Consequences Project

Goal

- Identify and monitor the unintended consequences of COVID-19 response measures to inform action to mitigate harms and amplify benefits

Objectives

- Describe the nature, magnitude, distribution, and determinants of unintended consequences, using an equity lens
- Prioritize issues needing urgent attention
- Monitor changes in unintended consequences

Unintended Consequences Project

Domains

- Health sector
- Economic sector
- Environment
- Society

Key Deliverables

- List of unintended consequences (ongoing)
- Framework for prioritizing unintended consequences
- Report describing each unintended consequence
- *Out of scope: Recommendations for action*

Unintended Consequences WG

- WG accountable to Public Health Leadership committee
- WG membership includes representatives from:
 - All health authorities (including FNHA and PHSA)
 - Office of the PHO
 - Ministry of Health
 - Ministry of Mental Health and Addictions
 - Yukon
- Driven by a smaller project team (BCCDC, OPHO, FNHA)



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2. Identifying Unintended Consequences

Process for Identification of UniCons

- Initial set of unintended consequences identified by members of the Office of the PHO
- Snowball approach utilized to validate and expand on the set of unintended consequences
 - Potential proximal and distal determinants explored to anticipate directionality
- For example, unintentional injuries may be influenced by:
 - Less traffic on highways and roads leading to fewer MV crashes
 - Higher rates of speeding resulting in fewer but more severe injuries
 - Increased cycling and walking and other forms of active transit
 - Increased activities and interactions at home and indoor settings

Unintended Consequences

59 UniCons identified so far, including:

Mental Health and Substance Use	<ul style="list-style-type: none">• Population mental distress• Community mental health service utilization• Suicide and self-harm• Problematic substance use• Overdose harms and deaths
Child and Maternal Health	<ul style="list-style-type: none">• Missed immunizations• Perinatal outcomes• Infant/maternal health outcomes with loss of postpartum visits• Child health – delayed diagnoses• Child abuse/neglect, children coming into care• School connectedness• Educational disparities

Unintended Consequences

59 UniCons identified so far, including:

Social and Community Impacts

- Stress of social isolation among long term care residents
- Gender-based violence
- Stigma, intolerance and racism
- Community violence, sense of safety in community
- Indigenous peoples cultural connectedness/wellness
- Community and family connectedness
- Connection to culture and cultural activities

Healthcare Services

- Implementation of virtual health options
- Delayed/deferred screening and diagnostic services
- Delayed non-urgent surgery
- Emergency site visits for urgent care needs
- Health sector human resources

Unintended Consequences

59 UniCons identified so far, including:

Communicable Diseases	<ul style="list-style-type: none">• Droplet transmitted communicable diseases• Infection prevention and control practices
Economic	<ul style="list-style-type: none">• Unemployment / underemployment• Income / poverty• Workforce for essential services• Food security• Housing / shelter
Health and Wellness	<ul style="list-style-type: none">• Unintentional injuries
Environment	<ul style="list-style-type: none">• Responses to wildfires

Indicators

- Indicators developed for each consequence
 - Based on input from subject matter experts and available data sources
- Indicators will be stratified where possible by:
 - Sex / gender
 - Age (5 year increments)
 - Rural / remote / urban populations
 - Race / ethnicity
 - Indigenous identity (First Nations, Metis, Inuit)
 - Socioeconomic status (education, income, and employment status)



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3. Framework for Prioritizing Unintended Consequences

Criteria for Significance of Impact

NEGATIVE / HARMFUL CONSEQUENCE	POSITIVE / BENEFICIAL CONSEQUENCE
#1 – Severity of the harm 1 = inconvenience 5 = moderate health impact (e.g., obesity, diabetes) 10 = death	#1 – Intensity of benefit 1 = superficial 5 = moderate health impact (e.g., increased physical activity) 10 = longer healthier life or remedy of chronic issue
#2 – Size of the population impacted 1 = less than 10 individuals 5 = approximately half of the BC population 10 = entire BC population	

Criteria for Significance of Impact

NEGATIVE / HARMFUL CONSEQUENCE	POSITIVE / BENEFICIAL CONSEQUENCE
<p>#3 – Vulnerability of population impacted AND likelihood of increasing inequity for underserved population</p> <p>1 = somewhat vulnerable population with low likelihood of increased disparity</p> <p>5 = population with underserved needs and reasonable likelihood of moderate disparities</p> <p>10 = most underserved population with irreversible widening of multiple disparities</p>	<p>#3 – Vulnerability of population impacted AND likelihood of reducing inequity for underserved population</p> <p>1 = somewhat vulnerable population with low likelihood of short-term increase in access to services</p> <p>5 = population with underserved needs with increased access to services and improved health outcomes</p> <p>10 = most underserved population having widespread increased access to services</p>
<p>#4 – Anticipated duration of the impact</p> <p>1 = temporary and short-lived</p> <p>5 = moderate-term; aligns with COVID phase 1&2 (Mar 16 to Sep 30)</p> <p>10 = lifelong impact</p>	

Process for Prioritising Consequences

- Significance of impact scored independently by seven individuals
 - Reviewers discussed to reach consensus
- Consequences categorized into tiers based on urgency of response

TIER	
1	Requires immediate action
2	Requires action within 6 months
3	Requires action within 6-18 months
4	No action required at this time but will continue to monitor

- Priority consequences validated with the Working Group

UniCons Prioritized as Tier 1 (33/59)

Population Health

- Missed immunizations
- Increased problematic substance use (legal and illicit)
- Increased overdose harms and deaths
- Increased gender-based violence
- Increased population mental distress
- Social Isolation (such as in Long Term Care facilities)
- Increased stigma, intolerance, and racism
- Connection to arts and cultural activities
- Increased family and community connectedness

Health Care System

- Deferred/delayed screening and diagnostic services
- Reduced community mental health service utilization
- Reduced emergency site visits for urgent care needs
- Deferred elective surgery (health complications / decline in quality of life)
- Decreased infant/maternal health outcomes age 0-2 with loss of postpartum visits
- Decline in health sector human resources
- Improved infection prevention and control practices
- Increased implementation of virtual health options

UniCons Prioritized as Tier 1 (33/59)

Other Sectors

- Food security
- Housing/shelter
- Educational disparities
- Reduced income/increased poverty / Increased income inequity
- Increased household unemployment / underemployment
- Decreased school connectedness
- Increased child abuse/ neglect, and children coming into care
- Unintentional injuries morbidity/mortality
- Reduced workforce available for essential services (non-health workers)
- Decreased ability to respond to wildfires



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4. Describing Unintended Consequences

Based on SBAR Framework

- Situation
 - How did the consequence result from the COVID-19 response measures?
- Background
 - Is the UniCon an existing issue exacerbated by or a direct result of COVID-19 measures?
 - How did the UniCon result from the COVID-19 response measures?
 - Provide related literature/evidence, including current research underway
- Assessment and key indicators
 - Reasons for its priority
 - Data sources and indicators
- Actions planned or underway, and considerations for further action

Expansion to Include:

- Linkages with key stakeholders
 - Government and non-government partners
- Equity considerations
 - Effect on different populations
 - Contribution to increasing or decreasing existing inequities
- Effect on Indigenous populations
 - First Nations peoples
 - Metis peoples
 - Urban Indigenous peoples



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5. Plan for Engagement

Purposes of Engagement

Engage with stakeholders and Indigenous rights holders to:

1. Identify additional UniCons
2. Provide input into and feedback on reports of UniCons
3. Assist in identifying and informing actions to mitigate harms and leverage benefits of UniCons

Key Groups

- Health authority and their partners
- Ministry of Health and their partners
- Other government ministries and their partners
- Researchers and research funders
- Indigenous rights holders

Indigenous Rights Holders

- Affirms self-determination of Indigenous peoples and communities
- Recognizes Indigenous peoples have unique ways of knowing and being that are distinct from settler society
- Frame for engagement to uphold the inherent and immemorial rights of Indigenous peoples



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6. Communications Plan

Purposes of Communications Plan

- Outline how the unintended consequences project and reports will be shared
 - Target audiences
 - Key messages
 - Methods
 - Desired outcomes

Communication of UniCon Project

Target Audience	Messages	Methods	Desired Outcome
Policy makers and program managers	COVID-19 has had impacts beyond the disease. These impacts have not been experienced equally by different communities	<ul style="list-style-type: none"> Routine and/or new tables Reports 	<ul style="list-style-type: none"> Increased awareness Considerations how to mitigate harms and strengthen benefits
Public health practitioners	COVID-19 response measures need to be balanced against the broad range of unintended consequences.	<ul style="list-style-type: none"> Presentations Reports Journal articles 	<ul style="list-style-type: none"> Increased awareness Considerations how to improve response
Researchers	COVID-19 response has had a broad range of consequences which require deeper understanding	<ul style="list-style-type: none"> Reports Presentations 	<ul style="list-style-type: none"> Inform priorities for research on UniCons based on data gaps
General public	Public health is aware of impacts of COVID-19 response measures on people's health and wellness	<ul style="list-style-type: none"> Infographics Articles and news reports 	<ul style="list-style-type: none"> Increased awareness Build confidence in public health

Evaluation of Communications Plan

- Indicators to evaluate reach of Communications Plan
 - BCCDC website visits
 - Social media analytics
 - Academic outputs (e.g. journal articles, conference presentations/posters)
 - Media articles



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Summary

Summary and Concluding Thoughts

- Multiple measures in response to COVID-19, which had a diverse range of unintended consequences
 - COVID-19 has revealed and exacerbated existing inequities
- Unintended consequences are complex, intersectional, and rooted in structural factors
 - Understanding unintended consequences requires collaboration
- Need for Indigenous engagement to uphold Indigenous rights

Acknowledgements

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UniCon Data Team, which includes individual from: Regional health authorities, FNHA, PHSA (BCCDC PPH, Perinatal Services BC, BC Cancer, Child Health BC), BC Observatory for Population and Public Health, PHO Epidemiology team, HSIAR/MoH



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Questions?

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