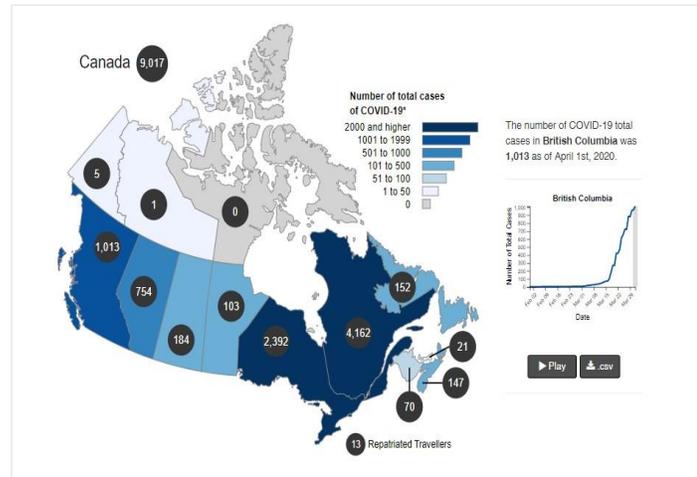


## HIGHLIGHTS

- January 15, 2020 the first Canadian COVID-19 case is discovered
- 64% of 9,017 confirmed Canadian COVID-19 cases were related to community transmission
- 36% were either exposed while travelling or exposed to a traveler returning to Canada
- Of the COVID-19 cases reported in Canada to date, approximately half (51%) are male
- Approximately one third (31%) of cases are 60 years old and over



|                                       |                                |                                    |   |  |   |  |
|---------------------------------------|--------------------------------|------------------------------------|---|--|---|--|
| <b>9,017</b><br>Number of total cases | <b>105</b><br>Number of deaths | <b>1397</b><br>Number of recovered | <b>4,162</b><br>Highest number of cases provincially (Quebec) | <b>0</b><br>Lowest number of cases (Nunavut) | <b>4</b><br>Number of provinces that have declared a state of emergency | <b>03</b><br>Current response projects to COVID-19 |
|---------------------------------------|--------------------------------|------------------------------------|---|--|---|--|

## SITUATION OVERVIEW

### Information on the Emergency

The 2019–20 coronavirus pandemic is an ongoing pandemic of coronavirus disease 2019 (COVID-19), caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). The outbreak was first identified in Wuhan, Hubei Province, China, in December 2019. The World Health Organization (WHO) declared the outbreak a Public Health Emergency of International Concern on 30 January 2020 and a pandemic on 11 March. As of 31 March 2020, more than 846,156 cases of COVID-19 have been reported in over 202 countries and territories, resulting in approximately 41,400 deaths. More than 176,000 people have since recovered.

The date of symptom onset of the first case of COVID-19 in Canada was January 15, 2020.

### People Affected

Since first identified in Canada, there are currently 9,017 confirmed cases of COVID-19 nationwide with the highest reported rates in Quebec (4162); Ontario (2392); and British Columbia (1013) according to the Public Health Agency of Canada in coordination with provincial public health authorities.

Public health efforts in Canada have focused on containment to delay the onset of community spread by rapidly identifying cases, meticulously finding close contacts and using public health measures such as isolation and physical distancing.

### Humanitarian Situation

#### Confirmed Cases (Mar. 31 - April 01)

- Saskatchewan (8) – reported eight new cases of COVID-19, bringing the province's total to 184
- Manitoba (7) – The province has announced seven new cases of COVID-19 in Manitoba, bringing the total number of lab-confirmed and probable confirmed cases in the province to 103
- New Brunswick (2) – New Brunswick reported two new cases of COVID-19 bringing the provincial total to 70 cases
- Quebec (732) – Quebec has six new deaths among 4,162 confirmed cases
- Alberta (64) has a reported 754 cases
- Newfoundland (4) – Newfoundland is reporting four new cases of COVID-19 with a total of 152 cases

- Prince Edward Island (3) – Three new cases of COVID-19 were identified in Prince Edward Island, bringing the province's total to 21
- Nova Scotia (20) – Nova Scotia has announced 20 new cases of COVID-19, bringing the total number of cases in the province to 147
- Yukon – the 5<sup>th</sup> case of COVID-19 was reported. Current number of confirmed cases remain at 5
- Ontario (426) – Provincial health officials announced 426 more cases of the novel coronavirus, bringing the total number of infected patients in Ontario to 2,392

### Gaps in Humanitarian Assistance

The COVID-19 health crisis has resulted in food not being distributed promptly to elderly and immune-compromised residents, who are now afraid to go out to shop for food. Gaps include the need for services such as grocery delivery, medications, and personal outreach to assess individuals' needs and connect them to community supports.

Further, Canada's implementation of physical distancing and limiting public interactions has impacted all non-essential services such as restaurants, schools (from daycares through to universities) restricted access to hospitals and nursing homes, banned mass gatherings such as sporting events, curtailing all non-essential travel and urged companies to have their employees work at home. These measures have resulted in employee layoffs and a second, economic crisis within the health pandemic crisis.

Already one million Canadians have applied for unemployment benefits, while an Angus Reid survey this week found that 44 per cent of Canadian households have suffered job losses or reduced hours.

Quantified impacts to Canada's First Nations communities is yet unknown.

Specific gaps include food service to vulnerable individuals and families in Halifax, Nova Scotia, Toronto, and Hamilton, Ontario.

## ADRA's RESPONSE

### Needs Assessment

ADRA Canada is using information and data provided by

the federal, provincial and territorial governments as well as information provided by the Emergency Management NGO Consortium of Canada (EMNCC), Provincial NGO alliances like the NGO Alliance of Ontario, SDA conferences and local churches to identify, communicate and coordinate response.

### ADRA's Response Activities

Nationally:

ADRA Canada in partnership with the SDACC (Canadian Union) and ADRA International has established a Covid-19 Emergency Assistance Fund of \$200,000. The grant is open to conferences, churches, groups and other affiliated entities that are responding to mitigate the negative effects of COVID-19 to the following sectors:

- Basic essential needs such as food, and non-food items and services
- Psychosocial support – setting up support helplines through each conference to provide short-term counseling and on-on-one support.
- Youth and family engagement – creative ways to involve/engage youth and families.

So far nine (9) grant applications have been received and 2 approved for a total of \$30,000. Grants awarded to date:

Really Living SDA Church - \$5,000  
Sector: Food security  
Prov: ON

Parker Street Food & Furniture Bank \$25,000  
Sector: Food security  
Prov: NS

Internationally:

- Indonesia COVID-19 Response Project – ADRA Canada to fund a \$45,000 CAD multi-purpose cash project for 200 elderly market vendors and informal workers in Palu, Donggala and Sigi of Central Sulawesi, Indonesia.

### Funding Opportunities

ADRA Canada will be looking for more funding opportunities if grant requests exceed the current

amount available.

In addition, we are:

- Networking with national NGO partners to explore potential in-cash or in-kind donations to ADRA Canada to aid rapid assistance for areas of need.
- Awaiting confirmation from conferences to see what emergency reserve funds they have and will propose a 3-way matching between ADRA, the Union and the local conference.

## CONSTRAINTS

### Security Constraints

ADRA Canada is working in compliance with all federal, provincial, territorial and municipal regulations. The province of Ontario, in which ADRA Canada's office is located has declared a state of emergency. ADRA personnel has been working from home but have daily meetings online or by phone. Nationally, citizens are strongly advised to:

- Practice physical distancing.
- Refrain from gathering of no more than 5 people
- All social and recreational places are closed.
- Violations of any restrictions will be subject to penalties.

### Other Constraints

Currently there no pressing constraints. The main concerns are:

- That we are working closely with the guidelines set forward by the Public Health Agency of Canada and provincial, municipal, territorial (PMT) health authorities/counterparts.
- Ensure efforts to source PPE continue. Currently none has been made available to NGOs nationally.

## PUBLIC RELATIONS

### Media

Please visit ADRA Canada's website for more information: <https://www.adra.ca/be-prepared-for-covid19/>

### Quotes

1. "We will need more masks, ventilators and testing kits, but how many more we need depends entirely on you. If you stay home and follow public health recommendations, you can slow the spread." Prime Minister of Canada Justin Trudeau, March 31, 2020 via The Canadian press.
2. "Right now, we're using 10 times more medical equipment as normal. So, what we used in one year, we're using in four weeks." Quebec Health Minister Danielle McCann.

### The next SitRep will be circulated on:

April 08, 2020

## CONTACT INFORMATION

### COUNTRY DIRECTOR

Steve Matthews

Email: [steve.matthews@adra.ca](mailto:steve.matthews@adra.ca)

Skype: [stevematthews65](https://www.skype.com/people/stevematthews65)

Office: 1.905.446.2372

Physical Address:

20 Robert St W  
Newcastle, ON L1B 1C6

### CANADIAN PROGRAM MANAGER

Daniel Saugh

Email: [Daniel.saugh@adra.ca](mailto:Daniel.saugh@adra.ca)

Skype: [danielsaugh](https://www.skype.com/people/danielsaugh)

Office: 289.276.0494

Physical Address:

20 Robert St W  
Newcastle, ON L1B 1C6

### ADRA INTERNATIONAL CONTACT

Elizabeth Tomenko

Email: [elizabeth.tomenko@adra.org](mailto:elizabeth.tomenko@adra.org)

Skype: [etomenko.adra](https://www.skype.com/people/etomenko.adra)

Mobile: 240.463.2480

Office: 301.680.5146

Physical Address:

12501 Old Columbia Pike  
Silver Spring, MD 20904

### EMERGENCY PROGRAM DIRECTOR

Anita M. Odondi

Email: [anita.odondi@adra.ca](mailto:anita.odondi@adra.ca)

Skype: [anitamodondi](https://www.skype.com/people/anitamodondi)

Mobile: 1.905.925.3404

Office: 1.289.780.4518

Physical Address:

20 Robert St W  
Newcastle, ON L1B 1C6

### REPORT PREPARED BY

Peggy Caesar

Email: [peggy.caesar@adra.ca](mailto:peggy.caesar@adra.ca)

Skype: [homesickforheaven](https://www.skype.com/people/homesickforheaven)

Office: 289.804.1361

Physical Address:

20 Robert St W  
Newcastle, ON L1B 1C6

## DETAILED MAPS

Copy and paste detailed maps of the affected and response areas here.

