

Board of Health Briefing Note

To: Chair and Members of the Board of Health
Date: November 4, 2020
Topic: **Closing the Digital Divide in Timiskaming**
Submitted by: Dr. Glenn Corneil, Acting Medical Officer of Health/CEO
Prepared by: Lorna Desmarais **Reviewed by:** Amanda Mongeon, Kerry Schubert-Mackey

RECOMMENDATIONS

It is recommended that the Timiskaming Board of Health:

1. Receive report '*Closing the Digital Divide in Timiskaming*' for information.

Issue


There is a digital divide in the District of Timiskaming: a discrepancy between those who have access to information and communication technologies and the benefits they provide and those who don't. This divide can be the result of many factors including high costs for technology and online access and limited Internet connectivity in rural Northern Ontario.

Lack of equitable access to technology has become a critical issue for many and the COVID-19 pandemic has served to underscore and exacerbate these already significant inequalities. Now more than ever there is a need to be connected as many mental and physical health services are being delivered virtually, financial supports often require online applications, many are required to participate in distance learning, and/or have the ability to work from home and family and friends are able to maintain social connections through online tools while physically distancing from each other.

Ontario Public Health Standards (2018) and Timiskaming Health Unit Strategic Plan 2019-2023

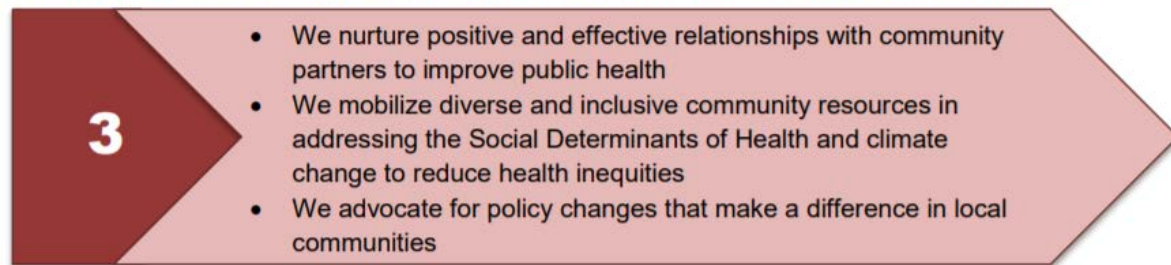
This work directly contributes to meeting requirements and expected outcomes in the Ontario Public Health Standards (2018) directly related to both the Health Equity and Emergency Management Foundational Standards and indirectly to for all other program standards. This work also supports THU 2019-2023 strategic directions 2, 3 and 4:

We create, share and exchange knowledge



- We use the best available information, including local lived experience, to inform local programs and services
- We exchange information with communities and partners to broaden our understanding of local needs
- We create quality data to address gaps in knowledge and to identify changing local needs
- We share our knowledge with stakeholders to understand the causes and impacts of health inequities

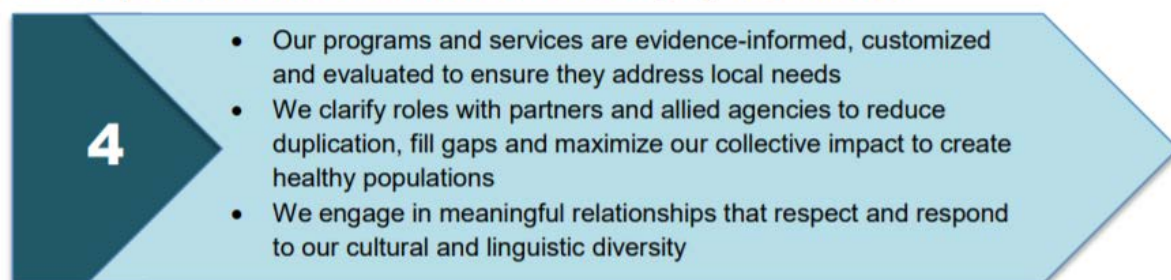
We collaborate with partners to make a difference in our communities



3

- We nurture positive and effective relationships with community partners to improve public health
- We mobilize diverse and inclusive community resources in addressing the Social Determinants of Health and climate change to reduce health inequities
- We advocate for policy changes that make a difference in local communities

We adapt to address the diverse and changing local needs



4

- Our programs and services are evidence-informed, customized and evaluated to ensure they address local needs
- We clarify roles with partners and allied agencies to reduce duplication, fill gaps and maximize our collective impact to create healthy populations
- We engage in meaningful relationships that respect and respond to our cultural and linguistic diversity

Background

Daily aspects of our lives are increasingly touched by digital technology, and access to high-speed Internet has become both essential service and key driver for improving our economic and social well-being and in democratic participation and freedom of expression¹. The United Nations recognizes the Internet as a human right.²

The digital divide also stems from income inequality among Canadians and differences in online connectivity practices exhibited by those of different age, gender, first language, and cultural background. Many of these same inequalities contribute to a lack of access for those in local communities, known as Internet inequity: differential access to the internet based on the factors mentioned above as well as community wealth, rurality, socioeconomic status and ethnicity.³ The percentage of Ontario seniors age 65 and over that use the internet continues to be lower than the rest of the population and tends to be influenced by income. Of the seniors in the lowest income level, 63.5% have home internet access compared to 88.2% of seniors in the second level, 94.9% in the third and 97.1% in the highest income level.³ Overall, 94.5% of Ontarians have home internet access but again, this percentage varies by income.⁴ For example, 83.4% of those in the lowest income bracket have home internet access compared to 94.9% in the second income bracket, 98.7% in the third income bracket, and 99.8% of those in the highest income bracket.⁴

In the Timiskaming Health Unit catchment area, there are an estimated 860 households with an annual income below \$20,000.⁵ Based on the above figures, about 143 of the lowest-income households across the region would not have access to home internet.

Of Canadians who did not have access to home internet, 47% have said it was because they couldn't afford the internet services or the technical devices, while 8% noted the unavailability of internet services.⁶ Rural areas across Northern Ontario are more likely than urban areas to experience the absence of internet services or poor quality and high cost of services when available.⁷

TECHNOLOGY AND COVID-19

Lack of equitable access to technology has been a long-standing issue for vulnerable populations including seniors and families living with low income. Access to technology was already a barrier for many prior to COVID-19, and the global pandemic has exacerbated this and a host of other pre-existing equity issues. Access to technology has become a critical issue now more than ever as many mental and physical health services are being delivered virtually, financial supports often require online applications, students are asked to participate in distance learning, and family and friends are able to maintain social connections through web based communication tools while physically distancing from each other. The Internet is also one of the most common sources of health information, and inequitable access to this information.⁸

A group of Timiskaming community partners has been meeting regularly since the end of March to identify opportunities to collaborate and amplify efforts, identify gaps and priority population groups and minimize duplication of effort related to mitigating COVID-19 related health and well-being disparities. Barriers to technology for population groups such as those living with low income and seniors was raised by partners as a gap needing to be addressed. As a result, an evidence brief was put together by the Timiskaming Health Unit (**Appendix A**), which included not only an outline of the problem, but potential solutions based on a scan.

<https://www.timiskaminghu.com/websites/timiskaminghu.com/files/COVID-19/Technology%20and%20COVID.pdf>

Closing the Digital Divide Pilot Project

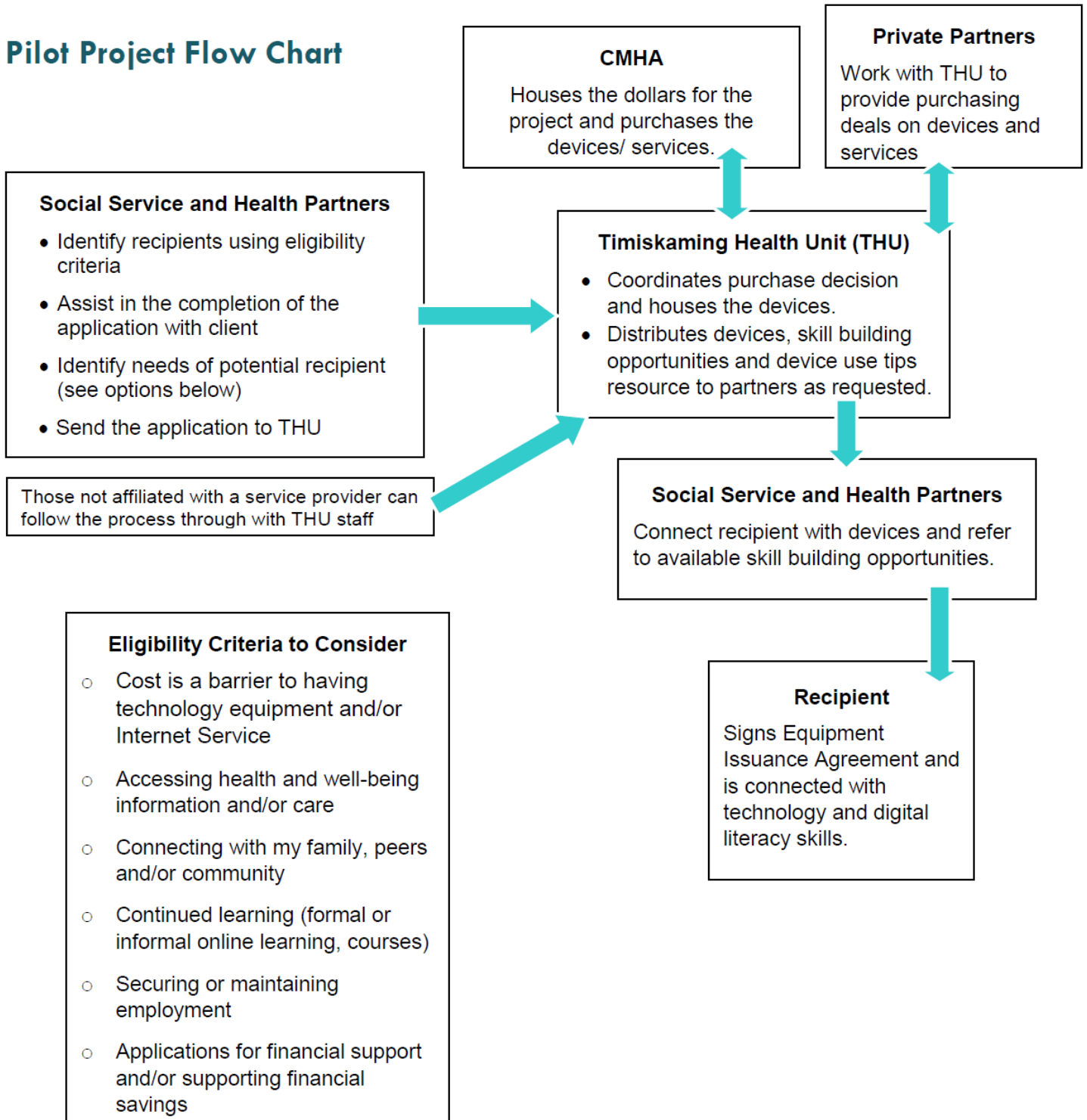
Closing the Digital Divide Pilot Project launched on October 13 with funding from DTSSAB, United Way and Temiskaming Foundation and partnership with CMHA, THU and various local community partners. This initiative will make technology more accessible for individuals, seniors and families experiencing barriers (e.g. financial hardship) in Timiskaming.

The Closing the Digital Divide Project aims to address inequity through the provision of technology and Internet to families, individuals and seniors who experience barriers to accessing technology. Those who are selected to participate in the project through partnering social service and health agencies will receive a device (smartphone, cellular tablet or laptop) as well as up to nine months of internet connectivity through a wireless Wi-Fi hub or cellular data plan.

The project will run until March 31st 2021. An overview of the Closing the Digital Divide Pilot Project can be found in **Appendix B**. All bilingual information related to this pilot project, including a Memorandum of Understanding between THU/CMHA and social service/health partners, the Client Request Form and the Wave Model Overview with Timelines (below) can be found on the Timiskaming Health Unit website <http://www.timiskaminghu.com/90490/Community-Supports#DigitalDivide>

Increasing Access to Technology in Timiskaming: Closing the Digital Divide

Pilot Project Flow Chart



Monitoring and Evaluation

The project will be monitored and evaluated at various stages to identify barriers and facilitators to implementation. The ongoing evaluation process will help to inform decision-making, clarify roles and functions, and identify areas in need of revisions at each stage of the project. A final evaluation will be conducted to assess the impact the project had on participants in terms of their health, well-being, social connectedness, ability to adapt to COVID measures, and so forth. A final report will be compiled and made available on the THU website.

THU Budget Impact

None

Related Timiskaming Health Unit Actions

Increasing access to technology for individuals, seniors and families experiencing barriers (e.g. financial hardship) in our district will help to close the digital divide in our communities and make it easier for population groups experiencing marginalization to stay connected to family and friends, access important information and health services, apply for support and so much more.

Current conditions created by the COVID-19 pandemic emphasize digital inequality across Canada, especially within Indigenous and rural communities and there is growing interest to address the digital divide. Digital access is a determinant of health and barriers to access are three-pronged: access to technology, digital literacy and affordable and quality broadband Internet. THU will continue to work in the following areas with our community partners:

- Continue to bring partners together to discuss mitigating health and well-being disparities related to COVID-19 in Timiskaming, including improving access to technology and Internet.
- Coordinate and collaborate with partners to implement the Closing the Digital Divide Pilot project across the district.
- Evaluate the pilot project to assess impact, inform local decision making related to the project and inform other jurisdictions.
- Support opportunities for additional funding to extend the duration and reach based on expressed interest of community partners (e.g. Home Support- older adults, Keepers of the Circle - Indigenous communities).
- Support digital health literacy in the population and promote digital literacy skills training opportunities, including connecting to existing local resources and services.
- Examine best practices in provision of virtual care and explore opportunities to support internal and external health service providers in awareness, knowledge and skills regarding digital health with a health equity lens.
- Explore upstream actions to address digital inequality including increasing the availability of quality, affordable broadband internet. This will include connecting with local MPP, FONOM President and AMO Executive Director and Northeast Caucus Chair.

REFERENCES

1. Office of the High Commissioner UNHR. OHCHR | SR on the promotion and protection of the right to freedom of opinion and expression.
<https://www.ohchr.org/en/issues/freedomopinion/pages/opinionindex.aspx> (2011).
2. Universal Declaration of Human Rights Article 19. <https://www.un.org/en/universal-declaration-human-rights/>
3. Katapally et al (2020). Countering COVID-19 Mental Health Crises with Digital Health Policy Interventions. Johnson Shoyama Graduate School of Public Policy. Access online June 16, 2020:
<https://www.schoolofpublicpolicy.sk.ca/research/publications/policy-brief/countering-covid-19-mental-health-crises-with-digital-health-policy-interventions.php>
4. Statistics Canada (2018). Table 22-10-0113-01 Use of Internet services and technologies by age group and household income quartile DOI: <https://doi.org/10.25318/2210011301-eng>
5. Statistics Canada (2017). Timiskaming Health Unit, [Health region, December 2017], Ontario and Ontario [Province] (table). Census Profile. 2016 Census. Statistics Canada Catalogue no. 98-316-X2016001. Ottawa. Released November 29, 2017. Accessed on June 1, 2020 from:
<https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index.cfm?Lang=E>
6. Statistics Canada (2019). Canadian internet use survey. Ottawa ON: Statistics Canada. Accessed on May 29, 2020 from: <https://www150.statcan.gc.ca/n1/en/daily-quotidien/191029/dq191029a-eng.pdf?st=Fnoriq9a>
7. Heppner, K. (2020, May 27). Massive rural-urban internet divide growing during COVID-19. Real agriculture. Accessed on May 29, 2020 from: <https://www.realagriculture.com/2020/05/massive-rural-urban-internet-divide-growing-during-covid-19/>
8. Rootman, I and D. Gordon-El-Bihbety (2008). A Vision for a Health Literate Canada: Report of the expert panel on health literacy.
https://www.cpha.ca/sites/default/files/uploads/resources/healthlit/report_e.pdf

Access to Technology in Timiskaming: The Digital Divide

June 15, 2020

THE SITUATION

Daily aspects of our lives are increasingly touched by digital technology, and access to high-speed Internet has become both essential service and key driver for improving our economic and social well-being and in democratic participation and freedom of expression¹. The United Nations recognizes the Internet as a human right.²

There is a digital divide in Canada: a discrepancy exists between Canadians who have access to information and communication technologies and the benefits they provide and those who don't. This divide can be the result of many factors including high costs for technology and online access, differences in the availability of online connectivity resources including limited internet connectivity in rural Northern Ontario and lacking digital literacy.

The digital divide also stems from income inequality among Canadians and differences in online connectivity practices exhibited by those of different age, gender, first language, and cultural background. Many of these same inequalities contribute to a lack of access for those in local communities, known as Internet inequity: differential access to the internet based on the factors mentioned above as well as community wealth, rurality, socioeconomic status and ethnicity³. The percentage of Ontario seniors age 65 and over that use the internet continues to be lower than the rest of the population and tends to be influenced by income. Of the seniors in the lowest income level, 63.5% have home internet access compared to 88.2% of seniors in the second level, 94.9% in the third and 97.1% in the highest income level.³ Overall, 94.5% of Ontarians have home internet access but again, this percentage varies by income.⁴ For example, 83.4% of those in the lowest income bracket have home internet access compared to 94.9% in the second income bracket, 98.7% in the third income bracket, and 99.8% of those in the highest income bracket.⁴

In the Timiskaming Health Unit catchment area, there are an estimated 860 households with an annual income below \$20,000.⁵ Based on the above figures, about 143 of the lowest-income households across the region would not have access to home internet.

Of Canadians who did not have access to home internet, 47% have said it was because they couldn't afford the internet services or the technical devices, while 8% noted the unavailability of internet services.⁶ Rural areas across Northern Ontario are more likely than urban areas to experience the absence of internet services or poor quality and high cost of services when available.⁷

TECHNOLOGY AND COVID-19

Lack of equitable access to technology has been a long-standing issue for vulnerable populations including seniors and families living with low income. Access to technology was already a barrier for many prior to COVID-19, and the global pandemic has exacerbated this and a host of other pre-existing equity issues. Access to technology has become a critical issue now more than ever as many mental and physical health services are being delivered virtually, financial supports often

What is the issue?

There is a digital divide in the District of Timiskaming: a discrepancy between those who have access to information and communication technologies and the benefits they provide and those who don't. This divide can be the result of many factors including high costs for technology and online access and limited Internet connectivity in rural Northern Ontario.

Lack of equitable access to technology has become a critical issue for many and the COVID-19 pandemic has served to underscore and exacerbate these already significant inequalities. Now more than ever there is a need to be connected as many mental and physical health services are being delivered virtually, financial supports often require online applications, many are required to participate in distance learning, and/or have the ability to work from home and family and friends are able to maintain social connections through online tools while physically distancing from each other.

What has been done?

A group of community partners has been meeting weekly since the end of March to share individual actions, identify gaps and opportunities to amplify efforts of others and/or collaborate, minimize duplication of effort in order to mitigate COVID-19 related health and well-being disparities among various populations.

Barriers to technology for those living with low income and seniors was raised by partners as a gap needing to be addressed. As a result, an evidence brief was put together by the Timiskaming Health Unit, which included not only an outline of the problem, but potential solutions based on a scan.

<https://www.timiskaminghu.com/websites/timiskaminghu.com/files/COVID-19/Technology%20and%20COVID.pdf>

What is the proposed pilot project?

Our **Closing the Digital Divide Project** aims to address inequity through the provision of technology and Internet to families living with low income, individuals and seniors who experience barriers, as identified through our partnering agencies. Those who are selected to participate in the program through our social service partners will receive a device (tablet, cell phone or laptop), a wireless Wi-Fi hub and data for a predetermined number of months.

How will this be funded? – Thanks to funding from DTSSAB, United Way and Temiskaming Foundation, we have \$120,000 to pilot this program across Timiskaming District. These funds will allow technology to be more accessible to seniors, individuals and families experiencing financial hardship in our region. Not just during the pandemic, but into the future.

Want to learn more?

- ◆ Do you have clients who are challenged with access to technology?
- ◆ Are you interested in learning more about this exciting project?
- ◆ If you were able to access technology and Internet access (free of charge) to provide to your clients/catchment or population experiencing barriers, would you be able to distribute them on behalf of the working group?

For more information about this project contact Lorna Desmarais
@ 1-866-747-4305, Ext. 2239 or desmaraisl@timiskaminghu.com

