

CAFII ALERTS WEEKLY DIGEST: December 10 to December 17, 2021

December 17, 2021

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GOVERNMENT LEGISLATION AND STRATEGY NEWS

Canadian Banking Teams Set For Mandatory Vaccination

The Federal Labour Minister Says Regulations Will Be Extended To The Private Sector

By Steve Randall, Wealth Professional, December 8, 2021

https://www.wealthprofessional.ca/news/industry-news/canadian-banking-teams-set-for-mandatory-vaccination/362454?utm_source=GA&e=YnJlbmRhbi53eWNrc0BjYWZpaS5jb20&utm_medium=20211211&utm_campaign=WPCW-Weekend-20211211&utm_content=9B8F63D4-69B1-4D0C-AE64-59C8BBAFABC8&tu=9B8F63D4-69B1-4D0C-AE64-59C8BBAFABC8

Workers in Canada's banking sector will have no choice about getting vaccinated against COVID-19 under a new government proposal.

Federal labour minister Seamus O'Regan Jr. announced on Tuesday, December 7 that the current regulations that require public sector workers to get a shot will be extended to federally regulated air, rail, and marine transportation sectors, along with all other federally regulated industries, such as road transportation, telecommunications, and banking.

"Canada has led the world on vaccination rates, thanks to Canadians, their belief in science, and their willingness to roll up their sleeves," he said. "Making vaccination mandatory across all federally regulated workplaces will protect workers, their families, and their communities. It will help us finish the fight against COVID-19 and help us sustain a strong and stable economic recovery."

The move will be seen as controversial by some, who believe that vaccination should be a personal choice. However, others will agree that protection of the many must come at the expense of the rights of the few. Indigenous Governing Bodies and First Nation Band Councils will be exempted from the new requirements.

In the US, several big name firms in financial services require their staff to be fully vaccinated before returning to the workplace, such as BlackRock, American Express, CitiGroup, Goldman Sachs, and Morgan Stanley.

Penalties For Non-Compliance

The proposals under Part II of the Canada Labour Code are intended to come into effect early in 2022. Those employers that do not comply may be subject to compliance and enforcement measures, including administrative monetary penalties.

"Vaccinations are one of the strongest tools we have in the fight against COVID-19 and in keeping Canadians safe and healthy," said health minister Jean-Yves Duclos. "Through these requirements, we help add an extra layer of protection in federally regulated workplaces."

REGULATOR/POLICY-MAKER NEWS

CISRO Appoints AMF's Eric Jacob As New Chair, Succeeding Ron Fullan

By Brendan Wycks, CAFII, December 16, 2021

On Thursday, December 16/21, The Canadian Insurance Services Regulatory Organizations (CISRO) announced the appointment of Eric Jacob, Superintendent, Client Services and Distribution Oversight at the AMF in Quebec, as its new Chair.

A media release issued by CISRO indicated that Mr. Jacob brings to the role over 20 years of leadership in the financial services industry spanning insurance, banking and securities sectors.

CISRO's media release also acknowledged the exemplary leadership, contributions and longstanding commitment of Ron Fullan, Executive Director of the Insurance Councils of Saskatchewan, the outgoing CISRO Chair. Under Mr. Fullan's leadership, CISRO implemented a harmonized Life Licence Qualification Program across Canada. Mr. Fullan also played a key role in strengthening the collaboration amongst CISRO members and between CISRO and the Canadian Council of Insurance Regulators (CCIR) and oversaw the implementation of the joint CISRO/CCIR Canadian Insurance Regulators Disciplinary Actions (CIRDA) database and the joint CISRO/CCIR guidance on the fair treatment of customers.

"I would like to thank Ron Fullan for his outstanding leadership and for driving the organization to its current state of maturity. CISRO members remain committed to supporting a consistent approach to consumer protection through the regulation of insurance intermediaries. I am honoured to be elected CISRO Chair and grateful for the confidence placed in me. I look forward to continuing to work with CISRO members and industry to ensure the fair treatment of customers," said Eric Jacob.

FSRA Working To Improve Its Market Conduct Service Results

The Regulator Met Or Exceeded Service Targets For 76% Of Its Standards In Q2, Yet Hurdles Remain

By Investment Executive Staff, December 10, 2021

https://www.investmentexecutive.com/news/research-and-markets/fsra-working-to-improve-its-market-conduct-service-results/?utm_source=newsletter&utm_medium=nl&utm_content=investmentexecutive&utm_campaign=INT-EN-morning

For the second quarter of its 2021-22 fiscal year, the Financial Services Regulatory Authority of Ontario (FSRA) met or exceeded service targets for more than three-quarters of its standards, according to its latest scorecard.

That compared with 86% in the first quarter. The standards cover FSRA's performance in 22 key regulatory areas in the auto, credit union, pensions, market conduct, and public affairs spaces.

Similar to Q1, the regulator cited the impact of the pandemic on its operations. There were “sharp increases” in the number of applications that came in, creating “challenges for FSRA to deliver against the standards.”

In the market conduct space, this was once again apparent when it came to areas such as individual mortgage broker licensing. Licences should be issued within 10 days for complete submissions, but this timeline was only met 25% of the time, compared with the 80% target. Applicants who had suitability issues identified were notified within 10 days 64% of the time, compared with the 80% target.

Those who submitted applications with missing information were notified of the issue promptly 100% of the time, exceeding the 80% target.

Similar results popped up for individual insurance agents. Only 9.3% of complete applications were processed on time while the service rate was 54.6% for those with suitability issues (both results also compare with 80% service targets).

For those agents with missing information, 100% of the errors were acknowledged promptly, exceeding the 80% target in that area.

In its report, the regulator noted the shortcomings and said it’s making changes.

“FSRA is expanding its resource capacity and evaluating current processing procedures to meet service standards by Q1 of FY 2022/23,” the report said.

One area of success for market conduct was FSRA’s ability to acknowledge complaints for all sectors it covers within three business days, exceeding its 90% target.

The regulator said it expects performance scores to improve in the subsequent quarters.

OSC Targets Shrinking Shelves, Tied Selling

Ontario Government Has Demanded Action

By James Langton, Investment Executive, December 13, 2021

https://www.investmentexecutive.com/newspaper /news-newspaper/osc-targets-shrinking-shelves-tied-selling/?utm_source=newsletter&utm_medium=nl&utm_content=investmentexecutive&utm_campaign=INT-EN

At the behest of Ontario Finance Minister Peter Bethlenfalvy, the Ontario Securities Commission (OSC) has launched inquiries into banks’ activities in two areas: the availability of third-party investment funds on their product shelves and the practice of tied selling to corporate clients.

In a letter sent late last month, Bethlenfalvy invoked a securities legislation provision to ask the OSC to undertake a review and report back by the end of February with recommendations.

The shelf-space issue is particularly timely, with the client-focused reforms (CFRs) due to take effect at the end of this year. The minister and regulators have raised concerns about the reforms' unintended consequences, such as bank-owned dealers curbing sales of third-party funds in response to more onerous compliance requirements.

As Investment Executive reported in August, CIBC and Toronto-Dominion Bank have removed access to new purchases of third-party products for branch-level financial advisors, and Royal Bank of Canada will do so as of December 31.

The government's letter to the OSC stated banks shrinking their shelves "would run counter to the underlying intent of the CFRs, which is to mitigate conflicts of interest and ensure that investors have access to the products that best serve their needs."

The Ontario government is not alone in its consternation.

At an investment industry conference in late September, Louis Morisset, chairman of the Canadian Securities Administrators and president and CEO of the Autorité des marchés financiers, said regulators are alarmed by reports that bank-owned dealers were shrinking their shelves in response to the CFRs.

"This is definitely not what the CFRs are meant to do," Morisset said. "The CFRs are meant to increase the professionalism of registrants, and to give them more tools to do a better job for their clients. If that boils down to reducing what they can sell, we have a big problem."

Grant Vingoe, chairman and CEO of the OSC, also expressed dismay at the banks' actions. Speaking at the OSC's annual conference on November 23, Vingoe said he reacted "viscerally" to reports that banks had begun restricting their product shelves in response to the CFRs' know-your-product provisions, which require reps be trained to assess the suitability of the products they sell and ensure they're in clients' best interest.

"With all of the technology being brought to bear and the skills of the advisor community, I couldn't accept the proposition that bank-owned dealers couldn't train their staff to include a reasonable range of independent products," Vingoe said.

In response to the government's request for a study of the issue, the OSC will undertake a compliance review of the bank-owned dealers to understand how they've addressed conflicts of interest in distributing proprietary products.

In particular, Vingoe said, the commission will look at how shelf construction has been carried out and the extent to which bank-owned dealers are limiting access to third-party products.

"We have to examine the consequences to investors ... and also to the entire ecosystem that squeezes out new and emerging — and really valuable alternatives — to clients," Vingoe said. "If the shelves are unduly constricted, over time it seems almost inevitable that costs to investors will increase because of the monopolization effect — so we have to examine the short- and long-term effects."

The OSC contacted firms on December 6 and expects responses by January 6, 2022.

Whether the regulators can get banks to change course is unclear. “I am not aware of any direct authority that could be relied on to require banks to sell ‘non-proprietary’ products,” said Jean-Paul Bureaud, executive director of the Canadian Foundation for Advancement of Investor Rights (a.k.a. FAIR Canada). “However, [the regulators] might explore imposing indirect requirements or restrictions.”

For example, Bureaud suggested, regulators could consider prohibiting bank employees from holding themselves out as “advisors” if they only sell proprietary products.

This probably would require comprehensive rule-making and potentially conflicts with efforts underway in a few provinces to restrict the use of the “advisor” and “planner” titles based on proficiency.

The Ontario Capital Markets Modernization Taskforce’s January report recommended stepping up oversight of product-shelf issues, issuing guidance and increasing disclosure to investors about whether or not they are receiving independent advice. The report also called for independent fund companies to report to the OSC when their products are excluded from a bank dealer’s shelf and for dealers to be required to report on the mix of proprietary and third-party products sold each quarter.

Still, these measures may not move the needle for independent products.

On the issue of tied selling, regulators are probably on firmer ground, given that various provisions already address the problem. For example, the mutual fund sales practices rules prohibit banks from making any lending (including mortgages) contingent on an investor also buying mutual funds. Coercive tied selling also is prohibited in banking legislation.

Tied selling “is squarely within [regulators’] authority,” Bureaud said. “The real problem lies in finding the best solution or tool to address the fundamental problem, which is often difficult to uncover, let alone prove.”

The OSC’s consultation paper on tied selling indicates that the regulator is seeking evidence and analysis from dealers, issuers, and others to determine whether anti-competitive tied selling is occurring — and, if so, to what extent. In addition, the OSC stated that it will review a sample of initial public offerings to determine whether anti-competitive behaviour occurred.

At the OSC’s November conference, Vingoe said if the big banks are using their lending power to unfairly dominate the underwriting business, that kind of anti-competitive behaviour would increase costs to both issuers and investors, and could squeeze out small investment dealers, “which would have an undesirable effect in Canada.”

Ontario’s task force made several recommendations for addressing tied selling concerns, including strengthening existing restrictions, requiring independent underwriters in certain offerings be introduced, and banning “restrictive clauses” from underwriting agreements.

Yet, as the OSC noted in its consultation, these measures could have unintended consequences of their own: potentially restricting issuer choice; harming capital-raising; and possibly benefiting foreign dealers at the expense of domestic firms.

DIVERSITY/INCLUSION/FIGHTING SYSTEMIC RACISM NEWS

Jordan Peterson Returns To Cambridge Where He Was A Victim Of Cancel Culture In 2019

'It's A Bit Of A Sore Spot': Peterson's Voice Rises In Emotion As He Recalls Learning On Twitter That His Cambridge Lecture Was Cancelled

By Dia Chakravarty, The Telegraph, December 13, 2021

<https://nationalpost.com/news/world/jordan-peterson-returns-to-cambridge-where-he-was-a-victim-of-cancel-culture-in-2019>

Cancel culture is personal for Jordan Peterson. His voice rises in emotion as he recalls the indignity of finding out on Twitter about his Cambridge lecture series – subsequently reinstated – being cancelled. “Sorry, it’s a bit of a sore spot,” he says, taking a drink of water.

But it’s also a great deal more than that to him. “This isn’t a battle between two viewpoints, it’s nothing that trivial.” Peterson, invoking his professional experience in clinical psychology, believes that “if you can’t say what you think, soon you won’t be able to think, because mostly we think in words”.

Herein lies the real danger of cancel culture, particularly at universities, whose primary function is arguably to nurture thoughts and help students learn to think for themselves: “The issue is there is no distinction between free speech and free thought. And there’s no thought without free thought. Thought by its nature is either free or it doesn’t exist. This isn’t a battle for some right. This is a battle for the heart of universities. And Cambridge has been a beacon and so has Oxford. You might even say the beacon for the world in such matters.”

Invited to speak at Cambridge University by the Divinity Faculty in 2019, Peterson had his invitation unceremoniously rescinded, ostensibly for being photographed with a man wearing an offensive T-shirt. The clinical psychologist and professor emeritus at the University of Toronto – who is also a best-selling author – has won both praise and criticism for being an unflinching advocate for free speech, inevitably clashing with the currently established dogma of identity politics.

The curious thing about Peterson is the extreme reaction he seems to invoke. Venerated by some as a prophet, to others he is “tantamount to Satan himself”. Marvel comics parodied him as Captain America’s nemesis, Red Skull, this year. “It’s been a weird year because it’s the same year that a book written about my ideas was given to the Pope. I’m somewhere on that spectrum, let’s say.”

A group of Cambridge dons, determined to take back from university authorities the right to invite speakers, decided to fight against cancellations such as Peterson’s – and won. An invitation was reissued, and Peterson has just completed his Cambridge visit, a successful one by all accounts.

What is it that's allowing Cambridge to resist the cancel culture when other Western universities are embracing it? The answer, according to Peterson, lies, at least partially, in the decentralised collegiate system of Oxford and Cambridge: "The problem with a highly centralised structure is that it's amenable to capture.

"I have seen more academics in Canada fed up with this than anywhere else yet. Although it hasn't resulted in the same kind of action as at Cambridge, partly because the governance structure of universities [in Canada] are such that now captured administrations have the upper hand, which is a huge mistake on the part of the faculty to ever allow that possibility to emerge." The University of California comes up as an example.

Peterson claims that applications for permanent posts (tenure) awarded to professors for STEM (science, technology, engineering and maths) posts can be rejected on the basis of the candidates' diversity and inclusion statements, "without any evaluation being given whatsoever to their research programme".

He is sceptical of the claim – predominantly from the political Left – that these statements are well-intended. "Are they really so well-meant? Just exactly what set of ideas are they attached to? Take equity, for example, the pursuit of which we are told is crucial in fighting discrimination. Is it even possible to have diversity and equity at the same time?" he asks.

"Because equity means the equality of outcome, which is exactly the opposite of any conceivable diversity. So how are we supposed to manage this? You'd think people who are concerned with words, academics, say, would be a little more cautious about such things. Words matter as far as I'm concerned, I weigh my words."

Weigh his words he certainly does. It is clear that each word is being carefully chosen before it is delivered, which gives Peterson's audience a sense of being privy to his thoughts. But it also makes it hard to know when a point has been made and the conversation can move on.

No discipline appears to be immune from being "captured" by what Peterson often characterises as the new unholy trinity of diversity, equity and inclusion. "It's happening in medicine, it's happening in chemistry, he warns, the latter a reference to a set of guidelines reported by the National Post as having been issued by Royal Society of Chemistry staff, to help the editors of its journal "minimise the risk of publishing inappropriate or otherwise offensive content."

The guidelines reportedly went on to state that in order to determine offence, "it is the perception of the recipient that we should consider, regardless of the author's intention."

"That is what law used to be 5,000 years ago, before we got sophisticated enough to consider intent," Peterson says. "We are just reversing now, casually."

When contacted, the Royal Society of Chemistry directed The Daily Telegraph to a different set of guidelines on their website, but no comment was offered on the existence of those to which Peterson refers.

When asked if he is worried about the rise of authoritarian China and Russia, Peterson responds with, “I’m also worried about the West! If we got our act together we could be a light to those countries.

“China and Russia are capitalising on our corruption at the moment – it’s bolstering the Russian regime in particular, and the Chinese regime to some degree.” Western corruption, in this context, is “our foolish demolition of our own traditions. There are many people in Russia, Hungary, Poland who are looking at what’s happening in the more liberal West and saying no, we’re not doing that here, and they might be erring too much in the opposite direction. These things are always subject to debate, which is the whole purpose of freedom of speech, by the way. But again, we look to ourselves first.”

Looking to oneself – whether as a nation or as individuals – forms a significant part of Peterson’s philosophy. “If we are better at being what we could be, then the alternative would look less attractive. That’s a good doctrine for life, isn’t it?”

This self-reflection and self-criticism also plays a crucial role towards building bridges and crossing divides. That, and judicious praise of one’s opponent where it’s due, as he likes to make a point of doing, whether lauding President Biden’s Bipartisan Infrastructure Law on Twitter and braving vitriol, or travelling to Washington to “bring together” politicians across the aisle, as he is scheduled to do in January.

“The proper idea,” he says, drawing again on his background as a psychologist, “is to look at the benevolence and the capacity for atrocity that characterises you! Because if you don’t see that within you, as the responsibility you have in relation to ethical struggle and in relation to conducting an ethical life, then you will absolutely see it in someone else, because it absolutely exists and has to find its place.”

Can this self-awareness, or even guilt – which “the Left has been extremely good at weaponizing” – be channelled to achieve something positive? It must, says Peterson: “Anyone with any sense who has any privilege has guilt about it. We know perfectly well that we are the undeserving beneficiaries in some sense of what our culture and our parents have arbitrarily bestowed upon us,” where arbitrary means “not through our own efforts.”

One must then “try to live a life that justifies those advantages. You take the burden of the catastrophe of history on to yourself and you take that seriously. And so then, you try to act like a noble and outstanding person, moving forward. If you don’t do that you’ll suffer for it. Because we have a conscience and it will take us to task.”

It is Peterson’s faith in the human conscience which makes him optimistic, though perhaps only marginally so, given that he is only too aware of the capacity of mankind to destroy ourselves as well as the world around us: “There were hundreds of millions of people killed in the 20th century, unnecessarily, for ideological reasons. And we can certainly manage that on a magnificent scale if we so choose.

"We're in a state now where our technological prowess has hit an inflection point. It's all we can do to keep up with it. We have no idea what's on the horizon. Not that we ever did in some sense, but the scope of technological transformation has broadened substantially. So we can do terrible things or great things. What are we going to do? Well I'm optimistic because fundamentally I believe that men of good will can prevail."

Optimistic he may well be, but Peterson is also mindful of the dangers of fashionable ideologies which "seriously compromise everything that we've accomplished, that is allowing people to lead lives more abundant in a material sense" and threaten to bring the house down.

"Misplaced guilt and a hatred for human enterprise, and the belief that we're a cancer on the face of the planet and that the planet would be better with fewer people on it or perhaps none.

"That's not the rock you build your house on."

CAFII MEMBER AND/OR PARENT COMPANY-SPECIFIC NEWS

Canadian Premier To Acquire Sun Life's Sponsored Markets Business, Including Credit Protection Insurance Portfolio

By Insurance Portal Staff, December 15, 2021

https://insurance-portal.ca/economy/canadian-premier-to-acquire-sun-lifes-sponsored-markets-business/?utm_source=sendinblue&utm_campaign=daily_complete_202112-15&utm_medium=email

Canadian Premier Life Insurance Company announced on December 13 that it has entered into an agreement to acquire the sponsored markets business of Sun Life Assurance Company of Canada, a subsidiary of Sun Life Financial Inc.

Sponsored markets include a variety of association and affinity, and group creditor clients. Canadian Premier says the deal will see more than 100 plan sponsors and about 1.5 million insured clients and plan members/customers move from Sun Life to Canadian Premier.

Upon close of the transaction, Sun Life expects to generate a one-time after-tax gain of approximately \$65 million. The transaction is expected to close in early 2023, subject to customary regulatory approvals and closing conditions.

"This is an exciting milestone for our company as we look to serve more Canadians through our affinity groups and creditor insurance businesses," said Suzette Huovinen, Chief Executive Officer, Canadian Premier. "We've provided Canadian families with coverage for more than six decades. Our new clients will continue to receive the same high-level of service and care they did with Sun Life. We are very excited to welcome a new group of employees to our Canadian Premier family and continue their great service to these customers."

Dave Jones, President, Sun Life Health, said his organization will work closely with Canadian Premier to plan for a smooth and seamless transition. "This transaction will allow Sun Life to focus on strategically growing the core segments within our group benefits business. As the largest group benefits provider in the country, we're dedicated to delivering industry leading products and wellness solutions," stated Jones.

Desjardins To Pay Nearly \$201M In Settlement Related To 2019 Data Breach

By The Canadian Press, December 16, 2021

<https://globalnews.ca/news/8456359/desjardins-settles-2019-data-breach-class-action-lawsuit/>

Financial services firm Desjardins Group will pay up to nearly \$201 million to settle a class-action lawsuit related to a data breach in 2019 that affected nearly 9.7 million Canadians.

The agreement, which is subject to approval by the Quebec Superior Court, would allow eligible individuals who were affected by the privacy breach announced in June 2019 to receive a payment.

The settlement applies to members and former members as well as clients and former clients of the financial co-operative who have held Desjardins credit cards or financing products.

Desjardins says there's no need for people to contact it before the agreement is approved and a claims process begins.

Plaintiff law firms Siskinds Desmeules and Kugler Kandestin say the agreement provides compensation for loss of time related to the personal information breach, as well as compensation for identity theft.

It also provides members with Equifax credit monitoring service coverage for five years, and an extension by at least five years of the other protective measures implemented by Desjardins following the breach.

A report by the federal Privacy Commissioner attributed the data breach to a series of technological and administrative gaps at Desjardins.

For at least 26 months, a rogue employee siphoned sensitive personal information collected by Desjardins from customers who had purchased or received products through the organization, a report by the commissioner found.

For some, the data included first and last names, dates of birth, social insurance numbers, street addresses, telephone numbers, email addresses, and transaction histories.

The breach occurred over more than a two-year period before Desjardins became aware of it, and then only after the organization had been notified by police, he added.

CIBC Agrees To Pay \$125 Million In Class Action Settlement

Lawsuit Claims Bank Downplayed Its Exposure To U.S. Residential Mortgage-Backed Securities Prior To The Financial Crisis

By Leo Almazora, Wealth Professional, December 7, 2021

https://www.wealthprofessional.ca/news/industry-news/big-six-bank-agrees-to-pay-125-million-in-class-action-settlement/362428?utm_source=GA&e=YnJlbmRhbi53eWNrc0BjYWZpaS5jb20&utm_medium=20211211&utm_campaign=WPCW-Weekend-20211211&utm_content=9B8F63D4-69B1-4D0C-AE64-59C8BBAFABC8&tu=9B8F63D4-69B1-4D0C-AE64-59C8BBAFABC8

CIBC has entered into an agreement to pay \$125 million in order to settle a class action lawsuit.

The class action, as explained in a press release from Rochon Genova LLP, was launched against CIBC and some of its former officers.

The lawsuit accuses them of making misrepresentations between May 31, 2007 and February 28, 2008 through quarterly financial statements and management discussion & analysis (MD&A), public oral statements, and filings with regulators about its exposure to U.S. residential mortgage-backed securities ahead of the financial crisis.

U.S. residential mortgage-backed securities were a key catalyst in the financial crisis as many of the underlying assets were riskier than investors had anticipated or were led to believe.

The big Canadian bank has denied the allegations and made no admission of liability or wrongdoing in the settlement agreement. CIBC said it reached the deal to avoid further legal costs and put the matter behind it.

Under the terms of the settlement, investors who purchased shares of CIBC any time from May 31, 2007 up to February 28, 2008 may be entitled to a payment.

The agreement has yet to be approved by the Ontario Superior Court of Justice, which will hold a settlement approval hearing set for January 12.

Class members are invited to express any views they may have about the proposed settlement, or note their objections, in writing to the court by January 7.

Sun Life Selects Board Of Directors Chair

By Lyle Adriano, Insurance Business Canada, December 13, 2021

https://www.insurancebusinessmag.com/ca/news/breaking-news/sun-life-selects-board-of-directors-chair-319678.aspx?utm_source=GA&e=YnJlbmRhbi53eWNrc0BjYWZpaS5jb20&utm_medium=20211213&utm_campaign=IBCW-MorningBriefing-20211213&utm_content=9B8F63D4-69B1-4D0C-AE64-59C8BBAFABC8&tu=9B8F63D4-69B1-4D0C-AE64-59C8BBAFABC8

Sun Life has selected Scott Powers as the new chair of its board of directors. Powers will assume leadership of the board following the company's annual meeting next year, on May 11, 2022. He succeeds Bill Anderson, who will retire once Powers takes on the role.

"Heartfelt congratulations to Scott on his new role as Sun Life chair. Scott is a highly respected board member who brings strong leadership, extensive experience in financial services, and a strategic, disciplined approach to governance," commented Bill Anderson. "He is the ideal candidate to lead the board during a time of significant change and opportunity in the asset management and insurance industries."

Since 2015, Powers has served as a director on Sun Life's board. He currently chairs the board's governance, investment & conduct review committee and is a member of the audit committee. He has over 30 years of experience in leading and advising firms in the investment management industry. Power is also currently serving on the boards of ADP and Pulte Group.

"I'm honoured to be selected as Sun Life's next chair of the board. I look forward to working with my board colleagues, Kevin Strain, and the executive team to advance Sun Life's proven strategy of putting clients at the centre to help them achieve lifetime financial security and live healthier lives," said Powers. "On behalf of the board, I would like to extend our sincere thanks to Bill for his strong leadership and many contributions that advanced and evolved Sun Life's strategy and capabilities to better serve our clients, while delivering industry-leading returns to our shareholders during a period of unprecedented challenge."

Prior to joining Sun Life, Powers was the president and CEO of State Street Global Advisors and Old Mutual Asset Management. He also held senior executive positions at Mellon Institutional Asset Management and The Boston Company Asset Management.

In September, Sun Life created the new role of senior vice-president and chief sustainability officer, tapping Alanna Boyd to serve the position. Boyd joined Sun Life in 2016, previously serving as vice president of government, regulatory affairs & sustainability.

Canada's Big Six Banks To Fare Well In 2022, Predicts DBRS Morningstar

Real Estate Lending Volumes Have Increased At The Big Six

By Melissa Shin, Investment Executive, December 10, 2021

https://www.investmentexecutive.com/news/research-and-markets/big-six-banks-to-fare-well-in-2022-predicts-dbrs-morningstar/?utm_source=newsletter&utm_medium=nl&utm_content=investmentexecutive&utm_campaign=INT-EN-morning

Canada's Big Six banks are well-positioned for 2022, according to analysis from DBRS Morningstar.

The rating agency found that continuing reversals of provisions for credit losses boosted earnings in the fourth quarter, though the pace of those reversals has also continued to slow.

"Higher interest rates should help offset some expected pressure to earnings in 2022, as reversals of [provisions for credit losses] on performing loans are expected to decrease from 2021 levels and capital markets activity is expected to remain more subdued compared with the elevated levels in the first half of 2021," the report said.

Higher mortgage lending also supported the banks in the fourth quarter, though DBRS remains concerned about housing market imbalances.

Canadian real estate secured lending volumes increased by 2.5% from the third quarter and by 10.6% year over year for the Big Six, with Bank of Nova Scotia and CIBC showing above-market growth over both periods.

Non-real estate lending volumes, however, remain well below pre-pandemic levels, particularly at National Bank.

In 2022, "higher interest rates will benefit the banks' net interest income, helping to mitigate wage cost pressures and normalizing capital markets revenues," the report said.

"In addition, the balance sheets of these banks remain strong with robust capital and liquidity metrics, although capital metrics will likely decline from current levels with the resumption of capital management activities."

A report from Fitch Ratings released earlier this week predicted that Canadian banks would likely see deterioration in their financials in 2022, but the agency also expects the banks' fundamentals to hold up as the economic backdrop weakens.

In terms of ratings for the Big Six, DBRS Morningstar said the five largest banks are stable, while National Bank is trending positive. The Big Six's long-term issuer ratings in particular range from AA (low; National Bank) to AA (high; Royal Bank of Canada and Toronto-Dominion).

COVID-19 PANDEMIC RESPONSE, RESILIENCE AND RECOVERY NEWS

Ottawa Isn't Properly Monitoring Or Tracking Its COVID-19 Border Rules, Auditor-General Says

By Marieke Walsh, The Globe and Mail, December 9, 2021

https://www.theglobeandmail.com/politics/article-public-health-agency-of-canada-doesnt-know-if-travellers-who-were/?utm_medium=email&utm_source=Coronavirus%20Update&utm_content=2021-12-9_20&utm_term=Coronavirus%20Update:%20Ottawa%20isn%e2%80%99t%20properly%20monitoring%20or%20tracking%20its%20COVID-19%20border%20rules,%20Auditor-General%20says&utm_campaign=newsletter&cu_id=Ts6FwhWx6n2rSHC0x7MiReEeFJOJkTb

The Public Health Agency of Canada failed to track compliance with its travel rules earlier this year and can't say to what extent testing and quarantining at the border was actually limiting the spread of COVID-19, the federal Auditor-General says.

Karen Hogan's latest series of reports on the federal government's pandemic response, released on Thursday, included one on PHAC's enforcement of quarantine and COVID-19 testing orders. The audit focused on the agency's performance between February and June, when the government rolled out new border rules. Those included a requirement that all air travellers entering the country submit to mandatory stays in quarantine hotels, most of which were operated by third parties under government authorization.

The report says that in 75 per cent of cases PHAC cannot verify whether or not people who were supposed to stay in the government-authorized hotels actually did. And 30 per cent of COVID-19 test results for incoming travellers were either missing or could not be matched to a specific person.

For 37 per cent of travellers, the agency was not able to verify compliance with quarantine orders, the report says. And 14 per cent of travellers whose COVID-19 tests came back positive never received any follow-up from PHAC to assess their isolation plans.

"Without verifying travellers' compliance with mandatory quarantine orders, the Public Health Agency of Canada cannot know whether its approach to enforcing the orders is effective or to what extent its approach serves to limit the spread of COVID-19," the report says.

At a virtual news conference, Ms. Hogan said she's concerned that the agency can't show "whether or not these border measures are effective." She added that the agency needs to do better on data gathering and monitoring.

"If they're going to put in a requirement, they really do need to have worked through how to monitor and enforce that requirement," she said.

The findings prompted a mea culpa from Health Minister Jean-Yves Duclos, who acknowledged at a news conference that the government's response has been "far from perfect."

"We acknowledge this and we are making no excuses for it. We can and we must do better," Mr. Duclos said.

At the beginning of the pandemic, the Health Minister said, PHAC was essentially a research agency focused on macro-level issues. He said it was not prepared to gather, store and share micro-level data like the location and contact information of individual Canadians. The agency, he noted, has improved its data collection and tracking since the audit period.

Mr. Duclos said he stands by the government's border restrictions, which vary depending on the region a traveller is coming from. He added that new rules unveiled in the past two weeks are particularly necessary given the emergence of the Omicron variant of COVID-19.

The new restrictions require fully vaccinated air travellers coming from countries other than the U.S. to take on-arrival tests and isolate at home until they receive results. Travellers from 10 countries in Africa where Canada believes Omicron to be especially worrisome must wait for their on-arrival test results at designated quarantine facilities.

The report looked at both government-operated designated quarantine facilities and government-authorized quarantine hotels. The authorized hotels are where the Auditor-General found serious enforcement gaps. A majority of air travellers were expected to go to those hotels to wait for their on-arrival COVID-19 test results between February and August, when the requirement ended.

About 370,000 people were expected to stay in the hotels during the audit period, but PHAC couldn't verify what happened with about 277,500 of them.

Ms. Hogan said border services agents checked that travellers had reservations for the hotels, but that PHAC couldn't confirm that the travellers actually arrived in most cases. Mr. Duclos said the problem was that the tracking information was not automated until June.

Ms. Hogan said her investigation determined that during the audit period the majority of travellers who were required to stay in designated quarantine facilities did comply with that rule.

As for the 37 per cent of travellers whose 14-day quarantines PHAC couldn't verify, the audit report says that was actually an improvement over an earlier audit. The previous report, which covered May to June, 2020, found the agency didn't track compliance for 66 per cent of travellers.

"This is not a success story. The agency's inability to confirm whether more than one third of travellers complied with quarantine orders remains a significant problem," Ms. Hogan said.

The Auditor-General attributed the improvement to the agency's decision to ditch paper-based data collection in favour of electronic collection of contact information.

Ms. Hogan said that in 59 per cent of priority cases PHAC doesn't know what follow-up local law enforcement did in response to suspected cases of non-compliance with COVID-19 requirements. Her report also notes that authorities issued no tickets for non-compliance to air travellers in Alberta or Quebec, where two of the four airports accepting international flights were located. Thousands of tickets were issued in Ontario.

In its response to the Auditor-General's report, the public-health agency said that "additional mechanisms will be assessed to enforce the Quarantine Act more consistently nationally," starting in the 2022-23 fiscal year.

In a statement, Conservative MP Luc Berthold, the party's critic for health, said the latest findings "reveal a pattern of incompetence, with severe gaps in the application of policies."

In a joint statement, NDP MPs Don Davies and Taylor Bachrach said the report reveals "negligence of gross proportions" that could have put Canadians at risk.

"We know that border-control measures that are evidence-based and well enforced can limit the number of COVID-19 cases," they said. "But without knowing for sure whether travellers followed quarantine orders, no one knows whether the government's border measures are working."

Auditor General Lays Bare Federal Incompetence At The Border

Canadians Don't Seem To Think 'Voting The Bastards' Out Is A Solution — And Unfortunately, They're Right

Opinion by Chris Selley, National Post, December 11, 2021

<https://nationalpost.com/opinion/chris-selley-auditor-general-lays-bare-federal-incompetence-at-the-border>

Never let it be said that Canadian bureaucracies can't learn on the fly. In a March 2021 report, federal Auditor General Karen Hogan found that from March to June 2020, the Public Health Agency of Canada (PHAC) could only verify that one-third of people who were supposed to be quarantining upon arrival in Canada had done so. By mid-2021, however, much progress had been made: a follow-up report released this week found that between January and June of this year, PHAC had only lost track of 37 per cent of incoming travellers.

Kudos to PHAC on the 73 per cent performance — seriously. As pathetic as you might reasonably deem that figure, it's still a remarkable number considering Canada's desultory performance in so many areas of pandemic management, especially at the border.

A separate AG report issued on Thursday, December 9 looked at the oversight over temporary foreign agricultural workers and their employers. Even when it came to verifying "basic living conditions" — i.e., rules that existed pre-pandemic — Employment and Social Development Canada (ESDC) "collected no information in almost all cases but found employers compliant," Hogan reported.

When it came to COVID-19-specific rules, such as mandatory quarantine, things were just as bad. “We found problems in about 73 per cent of the quarantine inspections we reviewed (in 2020),” Hogan noted. That actually got worse in 2021: 88 per cent of reports had problems, and the vast majority were never followed up.

Even when outbreaks occurred, the results were shoddy: the AG looked at all 62 outbreak inspections conducted in 2021 and found that “about 60 per cent ... were missing the information that the inspection processes required (such as photos of workers’ isolation space and confirmation of isolation through interviews).” (All but a tiny fraction of these inspections during the pandemic have been done “virtually.”)

In one case, an employer freely admitted housing a COVID-19-positive worker with everyone else, even turning down an offer from the local public health unit for a hotel room. ESDC did eventually follow up on that case, thankfully. And it only took a month.

Canadian citizens have much more leverage than temporary agricultural workers, but the government fared little better dealing with them. You might think it would have been much easier to keep track of arrivals in Canada after hotel quarantine became mandatory in February, but not so much. “(PHAC) had records to verify hotel stays for only 25 per cent of incoming air travellers,” Hogan found.

PHAC did refer more scofflaws to the constabulary in 2021 than in 2020, Hogan reported. Unfortunately, she also found that PHAC “did not know the outcome for 59 per cent of priority referrals.”

None of this should come as a surprise, and there is no reason to believe things are any better nowadays. Mandatory hotel quarantine is back in place for travellers arriving from 11 African countries, and reporters are gathering familiar and justifiable complaints: terrible and inappropriate food, lack of laundry, no access to medications and diapers, and other needless discomforts.

“I think that it’s really surprising that the Liberal government would react so poorly,” one woman stuck in a hotel after arriving from Africa told The Globe and Mail .

The incompetence laid bare in Hogan’s reports this week is so all-pervading that it’s difficult even to start arguing what should be done about it. You can’t fix decades of yawning complacency in a year and a half, even in extremis. That hotel-bound woman did provide a good example of exactly what we shouldn’t conclude, though: one, that any of this is surprising; or two, that Canada’s pandemic experience might have been hugely different had some other party been in charge.

At the margins, it’s easy to imagine some governments-in-waiting doing things differently that might have helped. But COVID-19 was coming to Canada in force one way or the other, and everything that mattered, from our border infrastructure to our hospital-beds-per-capita figure, was just waiting to be exploited.

On the bright side, perhaps, beyond the hardest of partisans and the chattering classes, it’s not clear many Canadians do believe these failures are party- or leader-specific issues. If a foreign visitor watched, read or listened to the news in Toronto, he might well assume Premier Doug Ford was as popular as athlete’s foot.

But Léger's invaluable polling for the Association for Canadian Studies over the course of the pandemic shows Ford in comfortable position to win next year's election: 54 per cent approve of his government's anti-pandemic measures, which is much lower than in the pandemic's early days, but which doesn't much threaten his job. François Legault's approval ratings suggest he could govern the province for 20 years, if he wanted to.

Léger's most recent poll found 68 per cent of Canadians would be willing to accept new lockdown measures to fight the Omicron variant. That's better than 68 per cent willing to riot in the streets to prevent such measures, no doubt. But the fundamental question remains: how do we force Canadian governments to get far, far better at what they do, when so many Canadians seem perfectly content to muddle along, hope for the best, and thank goodness things aren't any worse than they are?

Traveller Confusion Reigns Amid Shifting Advice And Variants

By Christopher Reynolds, The Canadian Press, December 11, 2021

<https://worldnewsera.com/news/canada/traveller-confusion-reigns-amid-shifting-advice-and-variants/>

Confusion is now the defining state for many Canadians considering travel this month amid shifting advice, COVID-19 variants, and layers of testing and quarantine rules.

The prospect of flying abroad is "incredibly confusing" as passengers remain uncertain about whether they will be tested at airports upon return or forced to quarantine — on top of the gamut of measures in other countries — said Marty Firestone, president of Toronto-based insurer Travel Secure.

"What do I need to get into that country? What do I need to get into this country? What do I need to get back into my own country?" he asked, paraphrasing client questions.

Many are now re-routing trips or cancelling altogether out of exasperation, Firestone said.

"We're just in a disarray, there's no other simple way to put it."

COVID-19 testing is one area where uncertainty abounds.

The federal government has said all passengers entering Canada, except those from the United States, need to be tested on arrival and isolate until they get their results. (Those coming from 10 African countries face further restrictions following initial detection of the Omicron variant in South Africa, despite its prevalence in more than 50 countries.)

But federal Health Minister Jean-Yves Duclos acknowledged on Friday, December 10 that Canadian airports do not yet have the capacity to fully test all non-U. S. international arrivals. He did not say when that could realistically begin, though random tests for returning overseas passengers are now underway.

"It's going to be mayhem and utter chaos at the airports once people return to Canada," Firestone predicted.

“Will they be herded into an assembly hall with 1,000 other people? Be left on the plane until the terminal gets empty enough to bring in the next 1,000 people? Or will they be handed a take-home test?” he asked.

Travellers also have to figure out testing requirements in other countries. A negative result from a rapid antigen or PCR test taken the day of or the day before departure is required to enter the U.S.

But only the costlier PCR test — the price tag can reach \$300 — is acceptable for return to Canada if residents want to avoid quarantine. Travellers have up to 72 hours before takeoff or border crossing to get the nasal swab, though many pharmacies offer no time guarantees.

Then again, if the trip is less than 72 hours, fully vaccinated flyers and road-trippers need not get tested after all.

“Complete confusion,” said John McKenna, CEO of the Air Transport Association of Canada. “Even we have calls with the department of transport, and they don’t have the answers.”

He said the federal government needs to communicate guidance more clearly as thousands of Canadians start to call off holiday trips.

For example, the federal government’s travel advisory website does not rank countries by their COVID-19 risk, unlike the U.S. Centers for Disease Control and Prevention.

Duclos said on Friday, December 10 that those planning to travel in the next few weeks should expect delays and hassle at the airport, and be aware that the situation could suddenly worsen.

“If they’re thinking of travelling, (Omicron) should be a serious alarm bell, a serious concern for them,” he told reporters. “It’s going to be uncertain and risky.”

Ottawa has not re-imposed an advisory against all non-essential travel abroad that it quietly lifted on October 21, but it warns Canadians to “exercise extra caution” as the Omicron variant spreads.

“Everyone’s very upset,” McKenna said, citing a lack of genuine consultation with industry.

“We’re not saying that the government is not taking this seriously,” he added. “We’re saying the government needs to be better organized and communicate better.”

On airport screening, Duclos said that as of November 30, airports could administer 11,000 COVID-19 tests per day and that number has since risen to 17,000 a day.

Full capacity would be 23,000 daily tests, and Duclos did not specify when that would occur.

He also announced that 35 million rapid tests will be delivered to provinces and territories this month, though questions remain around the breadth of their deployment.

Air Passenger Rights president Gabor Lukacs said he supports extensive and potentially stringent measures, but said passengers have been fined for refusing airport tests they didn't realize could be required of them.

"There is a lot of confusion about the law, for sure," he said.

The questions come after an auditor general's report on Thursday, December 9 that found Canada failed to adequately enforce border measures designed to keep international travellers from importing cases of COVID-19 into the country.

The World Health Organization said on Thursday, December 8 that it is too early to tell whether Omicron is more transmissible than the Delta variant, though preliminary data suggests the strain may not be as severe as initially feared.

Vaccinated Ontario Couple Say They Fought 'Stupid With Stupid' To Get Out Of Border Quarantine Order

By Samantha Beattie, CBC News, December 11, 2021

<https://www.cbc.ca/news/canada/toronto/ontario-couple-vaccinated-border-order-1.6281050>

What began for Eric and Kerri Langer as a quick trip to check on their New York property turned into a week-long struggle to reverse an unexpected quarantine order, all because their ArriveCAN app didn't load when they tried to cross the border on their return home.

Their "ridiculous" problem ended with a "ridiculous" solution, the fully vaccinated Cobourg, Ontario couple said. On Thursday, December 9, they found themselves driving back into the United States and then re-entering Canada so they could re-show their proof of vaccination papers to an officer.

The second time around, their papers were accepted and they were no longer required to quarantine.

"Look it, we had to fight stupid with stupid here," Eric Langer said while driving home afterwards.

The couple's experience is one of many that CBC News has reported on in recent months that demonstrate ongoing confusion and skepticism surrounding Canada's land border rules.

This past summer, several travellers reported getting robocalls reminding them to quarantine even if they weren't required to. One person was fined more than \$6,000 when he forgot his email password at the border and was unable to retrieve his negative test results. And in October, a Toronto man said he'd been sent other people's test results and personal information even though he hadn't travelled for months.

"In the court of law, we would have a right to defend ourselves," Kerri Langer said. "Here, you're guilty and there is no way of proving your innocence."

'There's No Information. It's Crazy'

The Langers entered the U.S. last weekend to visit their Lake Placid home for the first time since the COVID-19 pandemic began. They said they made sure to be well-versed on Canada's travel rules and kept the trip under 72 hours so they wouldn't be required to show a negative COVID-19 test result.

But when they pulled up to the Thousand Islands border crossing to return home on Monday morning, December 6, the ArriveCAN app with their proof of vaccination wouldn't load on Eric's phone, he said. The officer refused to look at their printed documents and ordered they quarantine for two weeks.

As a teacher at a short-staffed elementary school, Kerri said taking that much time off work wasn't an option. So, when they got home, Eric started making calls to elected officials, the Public Health Agency of Canada, and the Canada Border Services Agency (CBSA).

"The resolution should have been somebody calls to verify that we are indeed vaccinated," Eric said. "Boom. The quarantine is lifted. But there's nobody. There's no information. It's crazy."

After a few days of persistent phone calls, he said he reached a CBSA supervisor who advised that even though they were under a quarantine order, they were allowed to drive into the U.S. and back again — a rule the agency confirmed to CBC News. If they showed an officer the right documentation, the order would be lifted.

"I think the ridiculousness of today is that I couldn't get in my car and drive to the [grocery store], but I could get into my car and drive across the border and that was OK," Kerri said.

Kelly Sundberg, an associate professor in the department of economics, justice, and policy studies at Mount Royal University in Calgary who spent 15 years as a CBSA officer, said this case exemplifies the issues raised in the auditor general's scathing report this week about the federal government's handling of its border during the pandemic.

"The rules change. How they're enforced changes. Interpretation of these rules is dependent on the officer's location, and all in all, it really does nothing to safeguard or protect Canadians," Sundberg said.

"What it does do is cause extreme frustration and understandable hard feelings."

CBSA Accepting In-Person Documents, Minister Says

Although the Langers aren't sure why their second time around was a success, a couple of factors were at play this week that could provide an explanation.

Eric said when they were crossing back into Canada on Thursday, December 9, they were also informed by an officer that the ArriveCAN app was down and therefore printed documentation was acceptable, regardless of the rules.

The Public Health Agency of Canada confirmed that the service disruption will run until Tuesday, December 14, as the app is undergoing a scheduled update.

Also, Public Safety Minister Marco Mendicino had faced questions from opposition parties a few days before, on Monday afternoon, December 6, in the House of Commons.

"Let us talk about the ArriveCAN app that is supposed to protect Canadians but is actually making things worse at the border," Conservative health critic Luc Berthold said.

"People are being misinformed. No one is answering the telephone to help them. Seniors without smartphones cannot travel. We are hearing stories of mandatory quarantines for triple-vaccinated people."

In response, Mendicino said he'd directed CBSA to accept in-person information at the border, as well as on the ArriveCAN app.

The CBSA told CBC News on Friday night, December 10 that the ArriveCAN app remains mandatory for all land travellers, but they can now show a printed receipt at the border if they don't have a smartphone or mobile data.

Tam Admits Canada Wasn't Ready For COVID-19, Needs An Overhaul For Next Pandemic

By Ryan Tumilty, National Post, December 13, 2021

[Tam admits Canada wasn't ready for COVID-19, needs an overhaul for next pandemic \(msn.com\)](https://www.msn.com/en-ca/news/health/tam-admits-canada-wasnt-ready-for-covid-19-needs-an-overhaul-for-next-pandemic)

Canada's Chief Public Health Officer Dr. Theresa Tam is admitting the public health system wasn't prepared for COVID-19 and is proposing a new course to ensure the country will be ready for the next pandemic.

In a lengthy report, Tam says many of the issues are long-standing and in need of serious overhaul. She said the pandemic should serve as an alarm for what needs to be done.

"The COVID-19 pandemic has served as an important wake up call. Simply put, we were not prepared to face a public health emergency of the magnitude of COVID-19," she said.

Tam's report, entitled "A Vision to Transform Canada's Public Health System," highlights four key areas to improve, starting with the need to expand and develop a stronger workforce.

"Our public health system has been stretched dangerously thin and this is in need of critical reinforcements," she said.

Tam calls for more recruitment of public health workers and said the workforce also needs to be more diverse so it better mirrors the communities it serves. She argues public health has to be seen as an investment in health care that can ultimately keep people out of hospitals.

“An effective health system is more than treating illness through medicines and hospital procedures. It means preventing these illnesses from happening in the first place,” she said.

Tam is also calling for a significant improvement to the way data is collected and shared across the country. She said while it has improved over the course of the pandemic, Canada’s disjointed system of data collection has made it harder for experts to determine what was really happening during COVID-19 waves.

The National Post reported last year that Canada has spent \$147 million on a data system named Panorama. The investments began in 2004, after the SARS crisis, and continued for more than a decade but produced a system that isn’t being used during the pandemic.

Tam said the pandemic forced improvements in how provinces collect and share information and it’s important those improvements stay in place and are built upon after the pandemic.

“What I’m advocating for is that we build on some of the gains that we’ve had during this pandemic, we need to consolidate those gains and not let it slip backwards.”

Tam is also calling for improvements to the governance structures of public health agencies, making sure they have the ability to speak regularly to decision makers. She also argues for long-term stable funding for public health so that it doesn’t get increases only during a crisis.

“Public health always deals with very complex issues that take quite a long time to tackle. And as a result, they often span the duration of political election cycles.”

Tam’s report only touches on issues around border controls and screening for viruses. The auditor general found last week that the government was still not checking up on up to a third of travellers who are supposed to be quarantined.

She said a full review of how Canada handled those issues is important, but also said viruses can move into Canada before officials are even aware they exist.

“This Omicron variant has again demonstrated that viruses know no borders, so that as soon as you found out something about a new variant or the next pathogen or virus, it’s probably crossed borders.”

The agency has also been criticized for how an internal surveillance tool, the Global Public Health Intelligence Network (GPHIN), was used during the pandemic. While two independent reports found the system could not have found COVID-19 earlier than it did, they also found the system had become too bureaucratic and was in need of reform.

Tam said reforming GPHIN and integrating it with other surveillance tools is important, but it is also important that the agency has good analysis of the information it gathers.

Ian Culbert, executive director of the Canadian Public Health Association, applauded Tam’s report and said the government should create national standards.

“Canada lacks national data collection standards and so we have inconsistencies in how surveillance data are collected and reported. Chief among these is our failure to collect information concerning race, ethnicity, and socio-economic status,” he said in a statement.

Culbert also called for new legislation making clear which government would be responsible in a crisis.

“We need federal legislation for public health — a Canada Public Health Act — with clear roles and responsibilities defined for all governments and stakeholders.”

Tam didn’t provide specific budget figures or proposals for new legislation in her report, but said she hopes it would lead to a serious discussion after the pandemic.

“My hope is that the recommendations outlined in my reports are a much needed national dialogue and catalyze collective action on public health renewal,” she said. “Canada’s best defence against future public health threats is a strong public health system and a healthier population.”

Canada Temporarily Dropping 3rd-Country COVID-19 Testing For South Africa Travellers

By Eric Stober, The Canadian Press, December 11, 2021

<https://globalnews.ca/news/8443806/canada-south-africa-third-country-testing/>

Canada is providing a temporary exemption to its third-country COVID-19 testing rule for travellers leaving South Africa after receiving criticism for the policy.

From December 14 to January 7, 2022, all travellers on indirect flights from South Africa to Canada will no longer have to provide a negative COVID-19 test from a third country, according to the Canadian government’s website.

Instead, travellers can use a test from an accredited laboratory within South Africa if it is done no more than 48 hours before departure. A positive test result can also be used if it was obtained at least 14 days, and no more than 180 days, before departing.

Travellers’ flights must also depart within 18 hours from the country of transit, according to the government.

Previously, those travelling from South Africa had to obtain a pre-departure negative COVID-19 molecular test in a third country, regardless of vaccination status.

The requirement also applies to nine other African countries but there is no indication the exemption will apply to them if travellers have been in those countries 14 days before heading to Canada.

The countries include Botswana, Egypt, Eswatini, Lesotho, Malawi, Mozambique, Namibia, Nigeria, and Zimbabwe.

Global News reached out to Health Canada to see if the exemption will be extended to those countries but did not hear back by publication time.

Canada has been criticized for its travel restrictions since the Omicron variant was detected in South Africa and in countries around the world.

Earlier this week, Michael Embaie, the president of the African Community Association of Calgary, said that refusing to accept tests from South Africa was racist.

Embaie said that members of the community felt hurt.

They believe it's important for the federal government to address what they say is subtle racism behind Canada's new COVID-19 travel rules.

"You can't treat one country different from another country. It looks like the colonial mentality hasn't left."

Nigeria May Ban Flights From Canada In Retaliation For Omicron Measure

By Felix Onuah Reuters, December 12, 2021

<https://globalnews.ca/news/8444626/nigeria-canada-flight-ban/>

Nigeria plans to ban flights from Argentina, Britain, Canada, and Saudi Arabia from this week in retaliation for being added to those countries' red lists over the detection of the Omicron coronavirus variant last month, the aviation minister said.

Several countries have restricted the movement of people from some African nations since the Omicron variant was first detected in southern Africa and Hong Kong. It has since spread to at least 57 countries.

In recorded comments shared with journalists on Sunday, December 12, Nigeria's aviation minister Hadi Sirika said he had recommended that the four countries should be placed on a COVID-19 "red list," which would entail a ban on flights.

"We have given our input as aviation that it is not acceptable by us and we recommend that those countries, Canada, UK, Saudi Arabia, and Argentina be also put on red list, just like they did similarly to us," Sirika said.

"So, I am very sure between now and Monday or perhaps Tuesday maximum, all those countries will be put on the red list. Once they are on the red list, which means they are banned, their airlines will also be banned."

Britain was the first country to announce a travel "red list", which Nigeria has described as unjust and unfair.

The World Health Organization has said countries should apply an “evidence-informed and risk-based approach” when deciding on travel measures related to Omicron, including possible screening or quarantine of international passengers, adding that blanket bans do not prevent its spread.

COVID-19 Infections Are On The Rise And Omicron Could Quadruple Daily Case Counts, Federal Modelling Says

COVID-19 Cases Could Quadruple To 12,000 A Day In January If 'Omicron Successfully Establishes': PHAC

By John Paul Tasker, CBC News, December 10, 2021

<https://www.cbc.ca/news/politics/COVID-19-infections-rising-federal-modelling-1.6281026>

New modelling released today by the Public Health Agency of Canada (PHAC) suggests that the number of COVID-19 cases in Canada could increase sharply in the coming weeks, as the country grapples with another wave of delta infections and the highly transmissible omicron variant.

While there is a lot of uncertainty about how many cases might be reported, an increase from the current level of over 3,300 cases a day is likely, PHAC said, because Canada is experiencing a "gradual but steady increase" in infections.

The national "rT" — the metric that tracks the average number of people one infected person subsequently will infect — is now over one. That means the pandemic is again in growth mode.

Pointing to early findings from South Africa, where omicron was first identified and case counts have skyrocketed, PHAC said cases could quadruple to 12,000 a day in January if "omicron successfully establishes" and the current levels of transmission are maintained.

Omicron's "greater transmissibility" and the potential for "reduced protection from prior infection/vaccination" could drive this resurgence, PHAC said. The effectiveness of the current slate of COVID-19 vaccines against omicron is still under review.

As of December 9, there have been 87 confirmed cases of omicron reported in seven Canadian jurisdictions. To date, all reported cases of omicron in Canada have been asymptomatic or mild.

Even without omicron circulating widely, PHAC modelling suggests Canada could still be dealing with another wave of delta cases in the new year.

If the current level of transmission is maintained, cases stand to double to between 6,000 and 7,000 a day in January. If transmission levels increase, a delta-driven wave of roughly 12,000 cases a day is also possible, PHAC said.

While the modelling is concerning, Dr. Howard Njoo, Canada's deputy chief public health officer, said people shouldn't go into "panic mode."

"We should all respect the virus. It's a formidable foe and it's obviously evolving as we fight against it," he said.

"We need to respect it but not be panicked or scared. We have a great number of tools now and we know a lot more about the virus. We know vaccines protect against serious illness."

New Outbreaks Reported In Schools

Canadians between the ages of 5 and 11 are the most likely to contract COVID-19 right now given the low vaccine coverage in this demographic. The infection rate among kids aged 5 to 11 is over 20 cases per 100,000 people — four times higher than the rate for any other age group.

Hundreds of new COVID-19 outbreaks have been reported in the nation's schools and child care centres in recent weeks, driving up the infection rate for kids under 12.

COVID-19 cases in children often do not involve severe illness. To date, PHAC said, there have been over 380,000 reported cases in children and youths up to 19 years of age, with less than one per cent involving severe illness.

PHAC said the best way to blunt the spread of the virus is to ramp up the immunization campaign for people 5 aged to 11, and roll out third doses for other age groups.

PHAC data demonstrate just how effective the COVID-19 shots have been at keeping people out of the hospital. Unvaccinated people between the ages of 12 and 59 were 32 times more likely to be hospitalized for the virus than those who have had two doses.

Unvaccinated people over the age of 60 are 16 times more likely to end up in the hospital than the fully vaccinated. That's a positive sign, since older adults are more likely to produce a less robust response to vaccinations.

Last week, the National Advisory Committee on Immunization (NACI) strongly recommended all Canadians over 50 and other vulnerable groups — such as health care workers, Indigenous people, and those living in congregate care settings — get a booster shot six months after their second dose. It is also recommending that people aged 18-49 also get that third dose when they're eligible.

Modelling suggests hospital capacity can be kept at manageable levels if booster shots are widely available and Canadian kids get their shots. If the booster shot campaign or the rollout of vaccinations for kids 5 to 11 slows down, it's likely the nation's hospitals will be overrun in the new year, PHAC said.

"While there is still considerable uncertainty regarding the potential for omicron to evade immunity and increase severity, rapid resurgence in cases could potentially strain our still fragile health care system," said Dr. Theresa Tam, Canada's chief public health officer.

"Heeding public health advice, completing our primary series of COVID-19 vaccines, getting a booster dose when eligible, and keeping up with basic personal precautions — like wearing a well-fitted, well-constructed face mask, avoiding crowding, and improving ventilation and other layers of protection — continue to be our best and safest way forward."

Tam said Canadians can gather safely for Christmas if they restrict their guest list to people who are fully vaccinated. She also recommended keeping gatherings small.

"As we look to the holidays and weeks ahead, caution is still warranted. But as you consider the risks for you and yours, we can be thankful we're better protected with vaccines," Tam said.

Health Minister Warns Of 'Delays' And 'Hassle' For Travellers

Health Minister Jean-Yves Duclos said the federal government is focused on travel measures to keep omicron cases out of Canada.

After a slow start, the federal government is now administering 17,000 arrival tests a day at the country's airports, Duclos said, a measure meant to catch returning COVID-19 cases before they can infect others.

All foreign travellers from non-U.S. destinations can expect to be subjected to a test on arrival at a Canadian airport, he said. This new test is in addition to the pre-departure molecular test that all travellers must undergo before leaving for Canada.

"Canadians who are thinking of travelling abroad need to be warned that the situation abroad is both risky and unstable. They should also know that returning to Canada will likely involve delays and hassle," Duclos said.

Duclos said travellers need to plan ahead, prepare for a much longer airport arrivals experience, put together a strong quarantine plan, and use the ArriveCAN app to submit the required information.

How Omicron Spreads So Fast Is The Question Of The Moment. New Research Is Pointing To The Answer

Hong Kong Study Offers Clues On Transmission But Questions Remain Over Disease Severity, Symptom Presentation

By Lauren Pelley, CBC News, December 16, 2021

<https://www.cbc.ca/news/health/omicron-variant-hong-kong-study-1.6287519>

New research from a team in Hong Kong offers a clue to why the Omicron coronavirus variant is spreading so astonishingly fast around the world: it may be multiplying 70 times quicker than earlier strains within our lower airways.

The laboratory-based study, led by researchers from the LKS Faculty of Medicine at the University of Hong Kong, was shared online as a press release on Wednesday, December 15 and is currently undergoing peer review for publication.

The researchers found that, just 24 hours after infection, Omicron multiplies 70 times faster than either the Delta variant or the original SARS-CoV-2 virus within tissue samples of human bronchi — the two large tubes that carry air from your windpipe to your lungs.

It's a finding that could explain why Omicron seems to transmit faster between humans than previous variants, and offers a striking contrast to how the variant replicated in the research team's samples of actual lung tissue compared to the bronchi. Within those lung samples, the variant multiplied at a rate more than 10 times slower than the original virus.

It's the lungs — not the bronchi — that are linked to potentially life-threatening COVID-19 complications such as pneumonia and, in severe cases, acute respiratory distress syndrome or ARDS. So if these findings hold up in a real-world setting, the team suspects that slower replication in the lungs might mean reduced severity of disease.

The finding also echoes early evidence from South Africa suggesting Omicron may be linked to a milder course of illness.

But severity of disease is not only a function of where and how quickly a virus replicates in a certain organ, "it is also a function of our immune response," said Dr. Dominik Mertz, an infectious diseases specialist with Hamilton's McMaster University, in an email exchange with CBC News.

People need to be careful in drawing direct conclusions from lab-based studies compared to how infections will actually present in the real world, he wrote.

"The latter must be based on observations in those who have confirmed infections, and we still have to learn more in terms of actual severity in a population like ours which has first and foremost mRNA-vaccine immunity."

Omicron Threat Likely 'Very Significant'

The lead researcher from Hong Kong — Dr. Michael Chan Chi-wai, an associate professor at the university's school of public health — also acknowledged that disease severity is tied to other factors, such as whether someone's immune system goes haywire in response to a coronavirus infection in what's known as a "cytokine storm."

"It is also noted that, by infecting many more people, a very infectious virus may cause more severe disease and death even though the virus itself may be less pathogenic," he said in a statement.

"Therefore, taken together with our recent studies showing that the Omicron variant can partially escape immunity from vaccines and past infection, the overall threat from [the] Omicron variant is likely to be very significant."

Ryan Troyer, a virologist and researcher at Western University in London, Ontario, stressed that the Hong Kong team's results are still preliminary.

"The differences they're finding here look fairly significant," he said. "It'll be interesting to see if this is backed up by additional studies."

Variety Of Symptoms, From Mild To Severe

Troyer also noted that the study adds to the growing pile of evidence that COVID-19 infections may present in a variety of ways, even before the rise of the Omicron variant, with symptoms ranging from severe and life-threatening to far milder and perhaps barely-noticeable.

Take the ongoing testing of professional sports teams in leagues such as the NBA and NHL, for instance. Troyer said those tests often pick up infections among the young, healthy players that the athletes themselves didn't even notice — since vaccination status, the age of those infected, and other factors all play a role in disease severity.

A Tuesday, December 14 presentation from Discovery Health, South Africa's largest private health insurance administrator, offered an analysis of an Omicron outbreak using more than 200,000 COVID-19 test results.

The team noted that for patients with Omicron who needed acute care outside of a hospital setting, the incubation period is typically only three to four days, with patients recovering a few days after that — a tighter timeframe than the previous estimated incubation period ranging from one to 14 days.

"The most common early symptom seems to be a scratchy or sore throat," said Dr. Ryan Noach, CEO of Discovery Health, during the presentation.

Nasal congestion and dry cough are also commonly reported, he continued, along with muscle aches or pain manifesting in different areas. "Particularly in lower back pain, which seems to be a hallmark in the out-of-hospital presentation," he said.

Such run-of-the-mill symptoms are easy to disregard, but experts say that's one of the many ways a more-transmissible variant might be spreading — both quickly and quietly.

"I think it's important for people to think about the fact that you can't assume that lack of symptoms means lack of virus," Troyer said.

When It Comes To Controlling COVID-19, It's The Ventilation, Stupid

By Sabrina Maddeaux, National Post, December 16, 2021

[Sabrina Maddeaux: When it comes to controlling COVID-19, it's the ventilation, stupid \(msn.com\)](#)

We've long known that improving indoor air quality is key not only to controlling COVID-19, but to preventing transmission of other viruses, as well. While vaccines and rapid tests are certainly important, they are only part of the puzzle.

There will always be people who choose to forgo vaccines, and that percentage is likely to increase if booster shots are required on a continuing basis. Laziness, skepticism, and indifference will eventually set in. Rapid tests, while certainly the trending solution at the moment, aren't a panacea, either.

To win this battle over the long term and fend off future pandemics, Canada will have to get serious about upgrading its ventilation standards — particularly in high-risk settings.

"It's an airborne disease. I think that's clear," said Dr. Adalsteinn Brown, co-chair of the Ontario COVID-19 Science Advisory Table at a press conference on Thursday, December 16. This shouldn't be a remarkable quote, but it is. While the science on this has been clear for at least a year and a half, Canadian health officials and politicians were either unable or unwilling to accept the evidence. Many are still reluctant.

In contrast to Brown's statement, Ontario's chief medical officer of health, Dr. Kieran Moore, said on Wednesday, December 15 that he's concerned Omicron may be airborne, which he called a "game-changer." The response from the medical community on Twitter could best be described as a collective eye roll.

On a federal level, Canada remains an outlier among peer nations for refusing to acknowledge airborne transmission, let alone educate the public about aerosols or update guidelines and public health controls to prevent this type of spread.

Canada is still largely a country obsessed with sanitization. While once a reasonable precautionary measure, it has become reflective of Canada's overall approach to problem solving: cheap and easy trumps expensive and effective. We're not a country that likes to think about, talk about, or do hard things.

For the record, the U.S. Centers for Disease Control and Prevention (CDC) states that the risk of transmission from contact with a contaminated surface is "low," at less than one in 10,000. However, the amount of money and effort put into sanitizing surfaces by governments, businesses, and individuals has created a sunk cost fallacy where we collectively refuse to move on, even as we preach "following the science."

We should've used calm periods during the summer and fall to update public guidance and begin a necessary overhaul of the country's ventilation standards and systems. While this will obviously be an ongoing process, urgency should've been given to settings such as long-term care homes and schools, followed by high-risk employment venues such as meatpacking plants and warehouses, then social settings such as entertainment venues, restaurants and bars, where masks can't always be worn.

But better late than never. The time to reconcile with reality and turbocharge our ventilation efforts is now. Governments and public health officials must immediately and publicly acknowledge that COVID-19 is airborne.

They should co-ordinate to provide guidance and incentives to businesses and building owners to improve ventilation as quickly as possible. Air filtration systems using technologies such as HEPA filters and ultraviolet lights should be in widespread use.

There must be a strong signal that safe air standards will become as important as any other health and safety standard that private businesses, public buildings, employers, developers, and landlords must meet. We have clean water standards, food safety standards, and property maintenance standards; improved ventilation should be no different.

One of the best ways to encourage private interests to quickly improve ventilation is to make air quality transparency the norm. This means equipping buildings with air quality monitors that anyone entering the premises can read and use to make informed decisions. This is yet another way to put control back in the hands of individuals rather than relying on broad and overbearing restrictions.

We will have to learn to live with this virus — and likely, eventually, others. Improved air quality isn't optional; it's key to getting back to "normal" and pandemic-proofing Canadian society. The sooner we prioritize it, the better.

Canada Poised To Tighten Borders, Warn Against Non-Essential Travel As COVID-19 Cases Surge

The Federal Government Is Poised To All But Shut Canada's Borders Once Again, And Is Warning Canadians Against All Non-Essential Travel

By Tonda MacCharles, Toronto Star, December 14, 2021

<https://www.waterloochronicle.ca/news-story/10539526-canada-poised-to-tighten-borders-warn-against-non-essential-travel-as-COVID-19-cases-surge/>

The federal government is poised to tighten Canada's borders once again, advising Canadians against all non-essential travel and getting ready to ramp up border testing and quarantine measures, the Star has learned.

Those include requiring Canadians who do travel abroad to once again produce negative PCR tests upon return, even for short trips outside the country of 72 hours or less — a condition that was briefly lifted before the onset of the omicron variant.

The government had weighed a broader border closure, with a ban on foreign nationals other than essential workers, which would have stopped travelers including those from the U.S. from entering Canada at all entry points, including land and air. But the Liberals appeared to abandon that plan after Prime Minister Justin Trudeau spoke to premiers in a Tuesday night, December 14 teleconference.

Incoming fully vaccinated travellers are to be tested on arrival and will have to quarantine at home while awaiting negative test results.

Following the telephone call between Trudeau and the premiers on Tuesday night, December 14, multiple sources said the federal government was set to announce on Wednesday, December 15 when the travel measures are to take effect.

Ottawa is expected to reinstate travel advisories at level three, which is basically where the country was until October when it began to lift restrictions on fully vaccinated travellers coming and going.

Canadians, permanent residents, their dependants, refugees, and people who are entering under family reunification permits will still have a right of entry, said a source with knowledge of the measures.

On the call, Trudeau told premiers it is critical to reduce travel for non-essential reasons, but he did not indicate what the specific border measures would be, said a provincial source.

Two sources told the Star that Alberta Premier Jason Kenney pushed back at federal authorities, challenging the need for the travel measures if the variant was already in Canada.

Canada's chief public health officer Dr. Theresa Tam is said to have explained that the border restrictions will minimize the impact on the short term.

The measures including the proposed ban on foreign nationals were expected to drastically halt the flow of incoming traffic, and buy provinces and territories time to deal with Omicron.

But it appeared after the call that ban was being reconsidered.

Last week, federal Health Minister Jean-Yves Duclos told reporters that despite a decision to test all incoming travellers, airports were only able to handle testing for about two-thirds of arrivals.

The main impact of the two measures that were under consideration would be “to significantly drive down the volume of travellers at the border, both air and land arrivals, because we’re also scoping in the U.S.” said one source, who was not authorized to speak publicly about the pending announcement. This would then allow more, if not most, people to be tested on arrival.

Some public health authorities have already reported community transmission (not linked to known travel cases) of the Omicron variant in Canada.

That includes Ottawa — where Deputy Prime Minister and Finance Minister Chrystia Freeland had to bail on an in-person fiscal update speech to the Commons because staffers had tested positive for COVID-19.

Canadians expect all governments to use “all levers at their disposal so that we do not face the same situation as the U.K., Denmark, or Sweden face,” said one insider.

“If we have less people coming in right now, we can do more testing. If we do more testing, we can do more contact tracing. If we do more contact tracing, we can do more control and limit the propagation of the variant. We can more easily and quickly identify a case, isolate that case, and help that person avoid mass community spreading, although we already have community spread.”

“The whole idea is to protect our health care system, because as opposed to March 2020, we don’t have the reserve of human resources. Hospitals are short-staffed across the country. Nurses are burnt out.”

A provincial source told the Star that Trudeau acknowledged the difficulty they all face, and recognized that with people fully vaccinated, “we don’t want to reduce Christmas gatherings for reasons of people’s mental health.”

Doubts were raised during the call with the premiers that the federal government can deliver on its plan to ramp up border testing and quarantine measures, with at least one province, Quebec, telling Trudeau that they do not have the personnel to send to border points of entry to increase testing.

Some Premiers Say Federal Travel Moves Are Evidence-Free ‘Political Theatre’

By David Akin, Global News, December 16, 2021

<https://globalnews.ca/news/8455790/canada-premiers-COVID-19-travel-restrictions-political-theatre/>

The Trudeau government’s aborted intention this week to ramp up travel restrictions amounts to little more than “political theatre” from a government that cannot produce data to support tightened travel rules, say multiple sources who work for premiers who participated in a First Ministers meeting on Tuesday evening, December 14.

The meeting was called by Prime Minister Justin Trudeau to look at ways to stem the spread of the Omicron variant of COVID-19.

The hastily arranged 90-minute teleconference convened by Trudeau opened with federal officials telling surprised premiers that Ottawa was considering the re-introduction of a mandatory 14-day quarantine on all incoming non-essential travellers, regardless of vaccination status or nationality, and planning to impose an outright ban on all non-essential inbound foreign nationals.

Several premiers challenged those notions, asking them to provide a scientific rationale for imposing such drastic restrictions. None was provided.

Instead, the day after that meeting, Health Minister Jean-Yves Duclos announced Canada would re-introduce a travel advisory recommending that no Canadian travel abroad unless absolutely necessary.

But the frustrated attempts by federal politicians to seek support for new quarantine and travel bans along with the existing ban on inbound travellers from six African countries had some sources in premiers offices suggesting that politicians are over-ruling the scientists when it comes to making public health rules.

An aide to one premier described the restrictions floated by Ottawa at Tuesday, December 14's meeting as "political theatre."

Sources in four different premier's offices, two of whom listened in on the 90-minute teleconference call, shared their observations about Tuesday, December 14's First Ministers' Meeting with Global News. Each one asked not to be identified other than as a senior aide to a premier. One of the concerns of the premiers is that a public already weary of public health restrictions will resist new rules imposed by politicians that cannot be supported by science.

At a press conference the day after the First Ministers Meeting, Canada's deputy chief medical officer of health Dr. Howard Njoo seemed to support the thesis that factors other than science were now influencing federal cabinet decisions.

"We work ... to put together the best advice we can based on the science," Dr. Njoo said. "Decision-makers take that into account but we recognize there are other considerations at play as well, beyond just strictly sort of technical public health advice that we may be giving to ministers."

The current ban on all inbound travel from six African countries was cited as an example of a public health rule made by politicians without data to support such a rule.

The Globe and Mail this week asked the Public Health Agency of Canada to provide data to support the existing ban Canada has on inbound travel from six African countries where the Omicron variant first gained a rapid hold and was told that such data could not be provided as a collection of random tests "is not designed to have sufficient statistical power to provide estimates of positivity rates by country of origin."

Indeed, when Njoo was asked by reporters on Wednesday, December 15 about the scientific rationale to support the targeted travel ban aimed at those six countries, he could not.

"I'm not saying there's a rationale one way or the other. We're obviously monitoring the situation. We have, sort of, the data," Dr. Njoo said.

And rather than defend the African travel ban, Canada's chief medical officer of health, Dr. Theresa Tam said, "It is very important for us to re-examine the policy."

“Having focused travel measures on a select few African countries has done nothing and continues to do nothing to protect Canada,” said Dr. Isaac Bogoch on Thursday, December 16. Bogoch, an infectious disease specialist at the University of Toronto, pointed to data from 2009 when, in response to that year’s H1N1 pandemic, Canada imposed similar bans on travel from a small group of countries. There was no evidence to suggest those 2009 bans worked.

That said, epidemiologists generally agree there is a role for blanket or broad travel restrictions at certain points in a pandemic.

“Travel and community spread are related: one feeds the other,” said Colin Furness, an assistant professor at the Dalla Lana School of Public Health at the University of Toronto.

“Travel bans make sense at the outset to limit inflow of the variant. It buys time. Once the variant has taken over, travel bans have no value. So we were right to ban travel and soon we will be right to end such bans.”

Ontario Expands COVID-19 Booster Shots, Ottawa Re-Imposes International Travel Advisory, As Omicron Variant Drives Infections

By Laura Stone, Marieke Walsh, and James Keller, The Globe and Mail, December 15, 2021

<https://www.theglobeandmail.com/canada/article-ontario-expands-boosters-ottawa-reimposes-international-travel/>

Ontario is speeding up COVID-19 booster shots for all adults, and the federal government re-imposed its advisory against all non-essential international travel, as Canada tries to slow the spread of the Omicron variant.

The new measures announced by Ontario Premier Doug Ford’s government on Wednesday, December 15 include expanded booster shots, introduced a shortened time frame between second and third doses, reduced capacity limits by half in large entertainment spaces and sports venues, and made rapid testing more readily available.

“It’s all hands on deck and it starts with booster shots. Nothing matters more than getting these third shots into arms,” Mr. Ford said at a news conference at Queen’s Park.

In Ottawa, federal Health Minister Jean-Yves Duclos brought in the new international travel advisory just 10 days before Christmas, and as airports were expecting December to be the busiest month yet since the start of the pandemic.

But he stopped short of imposing more significant restrictions that were also under consideration by Ottawa, including a travel ban on all foreign nationals and imposing a two-week quarantine or isolation requirement for returning travellers.

Still, Mr. Duclos warned that leaving the country poses a significant risk and more changes to the rules are still possible.

“To those who were planning to travel, I say very clearly: Now is not the time to travel,” Mr. Duclos said.

The rapid spread of the Omicron variant on a global scale “makes us fear the worst for Canadians,” he said, noting that people who travel abroad risk being stranded as Canada and other countries continue to change their travel rules.

At a separate press conference in Ottawa on Wednesday, December 15, Prime Minister Justin Trudeau said the new travel advisory means “a lot of people will choose to cancel travel plans during the holidays.”

He added that the advisory is a “clear indication of how seriously we take this new variant and the situation we’re in.”

Conservative MP Melissa Lantsman criticized the travel advisory, telling CTV News it doesn’t keep Canadians safer from Omicron.

The government says it still plans to expand its on-arrival testing and isolation rules, which so far are only being randomly applied to air travellers. But more than two weeks after the new rule was announced for all air travellers from outside the United States, Ottawa can’t yet say when it will be fully in place.

Getting booster shots in arms and expanding the use of rapid tests will be critical, Mr. Duclos said. The Health Minister said the government has already made 85 million rapid tests available to provinces and territories and an extra 35 million are being delivered.

He also said the government has 16 million booster doses available in stock and more will be arriving in the next few weeks.

Ontario Premier Doug Ford on Wednesday, December 15 said his government was looking to significantly scale up vaccinations to between 200,000 and 300,000 people a day, asking anyone in the health system, unions, and private sector to help out. He said beyond cutting capacity in larger venues, the province isn’t looking to further lock down, but rather focus on expanding rapid tests and booster shots. However, he added that “everything is on the table” if case numbers continue to rise.

Starting on Monday, December 20, Ontario will open up boosters to adults 18 and over. But as early as Friday, December 17, some pharmacies can start providing boosters to adults on a walk-in basis, the government said, adding that it’s up to the pharmacies to decide. Ontario is also cutting down the six-month interval between second and third doses to just three months, or 84 days, meaning millions of people will be eligible earlier.

The province also announced that it is slashing capacity limits by 50 per cent starting on Saturday, December 18 at indoor entertainment and sports venues with a capacity of more than 1,000 people, such as event spaces, fitness facilities, concert venues, theatres, and cinemas.

In addition, Ontario launched its “holiday blitz” rapid-testing program on Wednesday, December 15, with two million kits available for free at malls, holiday markets, public libraries, transit hubs, and liquor stores, with the initial locations primarily in the Toronto area.

Other provinces – such as Alberta and Quebec – have also expanded the availability of rapid antigen tests, viewed by experts as a valuable public health tool, along with other measures to prevent closings, lockdowns, and overwhelmed hospitals.

Quebec on Wednesday, December 15 reported 2,386 new cases of COVID-19, the most in the province since January, as it scrambled to prepare for the spread of the Omicron variant.

Premier François Legault said he was watching the number of hospital admissions before deciding whether to allow private gatherings of up to 20 vaccinated individuals as of December 23, as planned. Quebec has 309 COVID-19 patients in hospital as of Wednesday, December 15, far below the province’s peak of more than 1,500 during the height of the second wave in January 2021.

“We have to continue to study the situation,” the Premier said. “We can’t rule anything out.”

The province also announced this week that Quebecers would have access to five free rapid tests per person every 30 days through pharmacies as of next Monday, December 20. Health Minister Christian Dubé has said that he wants to massively expand eligibility for booster shots to combat Omicron, but that the province needs more vaccination workers before it can increase capacity.

Alberta Premier Jason Kenney on Wednesday, December 15 also announced a program to distribute rapid tests to the public through government sites and pharmacies, while loosening limits on private gatherings ahead of the holidays.

The province’s restrictions on indoor private gatherings had been among the most stringent in the country; unvaccinated people have been prohibited from having anyone at their homes, and vaccinated people were limited to two households.

Now, the limit in Alberta will be 10 people, not including children and regardless of the number of households that represents. The Premier described it as a “modest” change that is still more strict than most other provinces, some of which do not have any restrictions on such gatherings.

Mr. Kenney said the province remains concerned about the Omicron variant and is taking a cautious approach, but he said public health rules must remain reasonable to ensure public buy-in. He said there is no appetite for harsh lockdown-like restrictions, which he said appeared to be the consensus among premiers during a call with the Prime Minister on Tuesday evening, December 14.

The Premier also questioned the value of a federal advisory against international travel, given the measures already in place such as vaccinations for air travellers and masking while en route.

“I think the federal government has to explain how this would meaningfully address community transmission, which is already present with respect to Omicron,” he said.

The travel industry reacted with dismay to the federal Health Minister's warning to Canadians to cancel their international travel plans as the Omicron variant spreads rapidly.

Judith Coates, a travel adviser and co-founder of the Association of Canadian Independent Travel Advisors, said the renewed advisory comes as clients were booking winter vacations in the tropics.

"We just thought we were getting over the hump of things," Ms. Coates said.

Tim Perry, a pilot who is president of the international arm of the Air Line Pilots Association, said the government's advisory and warnings of possible border shutdowns will deepen the airline industry's financial losses.

'Circuit Breaker' Measures Needed To Prevent Omicron From Overwhelming ICUs, Science Table Says

2,421 New COVID-19 Cases Reported Today, Up 88% From Last Thursday

By CBC News, December 16, 2021

<https://www.cbc.ca/news/canada/toronto/COVID-19-ontario-dec-16-2021-science-table-modelling-omicron-1.6287900>

Ontario's COVID-19 science table on Thursday, December 16 called for immediate and stringent public health measures to combat a growing surge of the Omicron variant that could see ICU admissions reach "unsustainable levels" early next year.

The group's latest modelling suggests that without "circuit breaker" restrictions to reduce social contacts by about 50 per cent, booster shots alone will likely not be enough to stop daily cases reaching between 6,000 and more than 10,000 per day by the end of 2021.

Such measures, coupled with a sustained booster shot campaign of about 250,000 to 350,000 daily, could keep new cases below 5,000 per day in the same time frame, the table said. The most new infections ever recorded in Ontario during the pandemic were 4,812 on April 16, during the peak of the third wave.

"It's not a lockdown, it's not a stay-at-home order. But it does involve a reduction in contacts," said Adalsteinn Brown, co-chair of the advisory group, who presented the latest forecasts at a news conference in Toronto.

The measures could include things such as further capacity restrictions for indoor settings, and better enforcement of masking rules, Brown said.

"It's not new things that we haven't seen before, it's those core public health measures," he continued. "Every day that you wait, you have a greater spread and a bigger challenge ahead of you."

Those changes would buy time for the province to bolster its booster coverage, Brown said.

Without further additional measures, admissions of COVID-19 patients to critical care could, in an absolutely worst case scenario, reach 600 by the new year, the modelling suggests.

The province has said about 600 ICU beds are available, with nearly 500 more available for surge capacity if needed, but experts have said surgeries will start to be affected once roughly 300 COVID-19 patients are in critical care.

As of the evening of Wednesday, December 15, there were 328 people with COVID-19 in Ontario hospitals, up from 309 at the same time one week prior. Similarly, there were 165 patients being treated for COVID-19-related illnesses in ICUs, up from 155 on Thursday, December 9.

"This will likely be the hardest wave of the pandemic. There is still some uncertainty but there is an undeniable urgency," Brown said. "Waiting to take action means waiting until it is too late to take action."

Province Offers No Indication Of Renewed Restrictions

In a statement in response to the briefing, the Ministry of Health offered no indication that any further public health restrictions are coming, beyond a 50 per cent reduction in capacity for venues that hold more than 1,000 people, which was announced on Wednesday, December 15.

Asked specifically whether that move would be enough, Brown said it would of course help, but falls short of the kind of "circuit breaker" that is needed.

"They're not enough to really curb the rapid growth of the variant," he said.

In a release issued on Thursday, December 16, Cineplex said its theatres that can accommodate more than 1,000 guests — which accounts for most of its venues in Ontario — will begin operating at half capacity starting on Saturday, December 18.

"To accommodate these new government guidelines in our larger theatres, some guests with reserved tickets may be moved to other seats and auditoriums when they arrive on site to see their movie," the release noted.

Cineplex also noted its locations in Kingston, Sudbury, and Sault Ste. Marie, Ontario that are following local public health directives will continue to do so.

In its statement, the province said the modelling "affirms" that the best defence against omicron is dramatically ramping up access to booster shots. It was announced this week that as of Monday, December 20, anyone 18 and older who had their second dose more than three months ago will be able to book a booster appointment.

Public health units in Ontario collectively administered 119,286 booster shots on Wednesday, December 15. A total of 1,441,100 Ontarians have now had a third dose.

The statement pointed out that up to two million rapid tests will be available for free at pop-up testing sites in high-traffic settings including malls, retail settings, holiday markets, public libraries, and transit hubs over the holidays, as well as at select LCBO locations.

You can find a list here of pop-up sites confirmed so far. Each person is limited to one pack that contains five tests.

Uncertainty Over Severity Of Omicron Cases

In its modelling update, the science table drew a skeptical eye toward the conclusion that Omicron results in less severe health outcomes for those infected by it.

The latest data suggests that admissions to hospital and ICUs in the South African province of Gauteng — which has been particularly hard hit by Omicron — are on the rise.

Similarly, a rapid rise in Omicron cases has led to a steeper increase in hospitalizations and ICU admissions than any previous wave in South Africa more broadly, the table said.

The population of South Africa is also, on average, younger than that of Ontario. The median age in South Africa is 27, while in Ontario it is 41. Further, it is estimated that roughly 90 per cent of South Africans have previously been infected with a COVID-19 variant, imparting a degree of resistance to severe illness, compared to just 10 per cent of Ontarians.

Early data from Denmark, the table said, shows that the overall percentage of Omicron cases that required hospitalization is no lower when compared to earlier strains. In fact, the rate is even somewhat higher.

Brown conceded that there remains a lot of uncertainty about the ultimate severity of Omicron cases, but also pointed out that the sheer number of cases expected means that Ontario hospitals will be strained even if average outcomes are not as bad as with delta or other variants.

"It is a very, very transmissible disease that grows very quickly," he said. "Though uncertainty exists, waiting for more information will eliminate the opportunity for action."

He went on to recommend that regardless of any further government-imposed restrictions, Ontarians should get a booster as soon as they can, wear the highest-quality mask they can find, and avoid crowded indoor spaces.

"It's an airborne disease — I think that's clear," Brown said.

7% Test Positivity Rate

Meanwhile, Ontario reported 2,421 new cases of COVID-19 on Thursday, December 16, the most on a single day in seven months and an 88 per cent increase over the same time last week.

Today's additional cases push the seven-day average to 1,676, a 59 per cent jump from last Thursday, December 9.

The science table's most recent estimate has the number of new Omicron-linked cases in Ontario on pace to double every two days or so.

Omicron is infecting between four and eight times more people than Delta, according to Dr. Kieran Moore, Ontario's chief medical officer of health, and has already become the dominant strain in the province.

Public Health Ontario reported a seven per cent positivity rate from 54,724 tests on Thursday, December 16. That's the highest level since May 18, when a rate of 7.6 per cent was reported on just 22,915 total tests.

While cases and positivity rates are spiking in much of the province, the number of COVID-19 patients in hospitals and intensive care has continued to hold relatively steady, though there are signs that the burden is slowly increasing.

The Ministry of Health also reported the deaths of nine more people due to COVID-19, pushing Ontario's official toll to 10,102.

Booster Shot To Use A Vaccine Passport? Ontario Ponders Higher Standard As Scientists Sound Omicron Alarm

The Science Table Advising Premier Doug Ford Says More "Circuit Breaker" Measures Are Needed In Addition To Ramped Up COVID-19 Booster Shots To Slow The Speedy Spread Of The New Omicron Variant.

By Rob Ferguson and Robert Benzie, Toronto Star, December 16, 2021

<https://www.cambridgetimes.ca/news-story/10540712-booster-shot-to-use-a-vaccine-passport-ontario-ponders-higher-standard-as-scientists-sound-omicron-alarm/>

Ontario is at a crossroads in the struggle against COVID-19.

As Omicron rages and the science table urges "circuit breaker" restrictions to slow it, the Ontario government is considering a re-definition of "fully vaccinated" that would require booster shots be included on updated vaccine passports, the Star has learned.

That policy shift is part of the rapidly evolving public health crisis that has Premier Doug Ford's government assessing how far to go in combating a new variant that is far more contagious, but hasn't yet overwhelmed hospitals.

“Neither public health measures nor vaccinations will be enough on their own to blunt the Omicron wave,” Steini Brown, co-chair of the science table and dean of the Dalla Lana School of Public Health, said on Thursday, December 16, in presenting the latest modelling scenarios.

“It will take serious restrictions that reduce contacts.”

The science table urged the government to expedite capacity restrictions beyond the 50 per cent limit that takes effect Saturday at arenas, stadiums, theatres, and other venues that can host more than 1,000 people.

While the government isn’t planning any announcements on capacity restrictions at bars, restaurants, movie theatres, and gyms, it is considering changing the current definition of fully vaccinated to three shots from two for purposes of the Verify Ontario proof-of-vaccination QR code.

Dr. Kieran Moore, the chief medical officer of health, said officials are reviewing “the full benefit of a third dose strategy across Ontario.”

“We will be following the immunology of and benefit of that third-dose strategy and make recommendations to government as needed regarding that, including it as part of the verification certification process,” Moore said on Wednesday, December 15.

Sources say that is already being discussed at the highest levels of government, and if implemented it would make Ontario the first jurisdiction in Canada to make boosters mandatory to be fully vaccinated.

“This is where this is headed eventually,” a senior official said on Thursday, December 16, speaking confidentially in order to discuss internal deliberations.

An epidemiologist agreed that the move makes sense because boosters offer significantly more protection as immunity wanes from previous shots, but actual implementation will have to wait until more Ontarians can get third doses.

“Ideally, they would start including it,” said Todd Coleman of Wilfrid Laurier University. “It would be an incentive for boosters. We saw the bumps in vaccination when they announced vaccine passports in the fall.”

Health Minister Christine Elliott’s office said while “the definition of ‘fully vaccinated’ currently remains unchanged ... the province’s QR code and the Verify Ontario app are adaptable and can be modified if needed.”

“For example, individuals who have received their booster dose are currently able to download an updated QR code that reflects that they have received three doses should they wish to do so,” noted Alexandra Hilken, Elliott’s press secretary.

“Re-downloading your vaccine certificate with QR code after receiving a booster dose is not necessary in order to enter settings where proof-of-vaccination is required,” said Hilken.

However, the senior official said Ontario can easily do what France recently did and tie vaccine passports to boosters.

More than 11.3 million Ontarians have had two shots — with some 1.3 million receiving boosters — so the government believes there will be widespread acceptance of a third vaccination.

The looming change, which could still be weeks away, comes against the backdrop of Ontario reporting 2,421 new daily cases, 600 higher than the previous day and double the level posted last Thursday, December 9.

“There is still some uncertainty, but there’s also an undeniable urgency,” Brown said.

He said people should take more steps to protect themselves, wear the best multi-layer, snug-fitting masks they can get and reduce contacts outside their households by at least 50 per cent heading into a fraught festive season to blunt Omicron.

“We can do this without closing schools or shutting down businesses.”

The science table modelling was presented to Ford’s cabinet on Wednesday, December 15 before the government announced that anyone over 18 can get a booster shot starting on Monday, December 20, providing that it’s at least 84 days after their second dose — a waiting period that was previously 168 days.

Despite numerous international studies indicating that Omicron could be less severe than the Delta strain it is rapidly replacing, Brown predicted Ontario hospital and intensive care unit occupancy will rise quickly toward the end of the month and could reach “unsustainable levels” in January.

“It does cause severe disease ... it’s not just a case of the sniffles,” insisted Brown, adding hospitalizations for Omicron in Denmark have been similar to those for other strains.

In Ontario, hospitalizations have risen almost 27 per cent in the last four weeks and intensive care unit occupancy by 26 per cent.

Without any additional public health measures, Brown suggested daily case counts could hit 10,000 by early January.

However, the government said the modelling does not take into account the accelerated booster shot program — which aims to double or triple vaccination levels to 200,000 or 300,000 daily — and the capacity limits in large venues.

“While the province’s ICUs continue to remain stable, we expect the number of admissions to rise in the coming weeks as Omicron spreads, particularly among the unvaccinated,” said Hilkene in Elliott’s office.

There are now 165 COVID-19 patients in intensive care units, about 600 beds immediately available and “surge capacity” for almost 500 more, Hilkene added.

Quebec Government Tightens Public Health Measures As COVID-19 Cases Soar

Health-Care Research Institute Projects 700 Quebecers In Hospital By Early January

By CBC News, December 16, 2021

<https://www.cbc.ca/news/canada/montreal/quebec-tightens-COVID-19-measures-omicron-1.6288120>

As COVID-19 cases spike across the province and the threat of Omicron looms, the Quebec government will tighten public health measures on Monday, December 20, while speeding up its booster shot campaign.

"In this fight that we are waging, it's not enough to just get vaccinated," Premier François Legault said during a Thursday, December 16 news conference.

The province must also reduce the number of close contacts between people, he said.

Legault said the government does not want to close schools, so primary schools will re-open after the New Year on the regular date. High schools will use remote learning until January 10.

Masks will again be required in primary and high school classrooms and buses.

Private gatherings will be reduced to 10 people inside, 20 outside, and it is recommended that people use rapid testing kits before gathering.

Officials said that doesn't mean people should attend 10 parties with 10 people, but instead limit the number of gatherings they attend.

Quebec's new measures also include:

- Stores will have reduced capacity, allowing one client per 20 square metres.
- Places of worship will reduce capacity by 50 per cent, with a cap of 250 people. Vaccine passports will be required and people must be seated.
- Funerals and weddings can have up to 25 people without requiring vaccine passports, but up to 250 people with passports.
- For public activities, capacity is lowered by 50 per cent to a maximum of 250 people. People must stay seated and wear a mask at all times.
- Bars and restaurants must cut capacity by 50 per cent, spacing tables as much as possible, with a maximum of 10 people at tables. Dancing and karaoke are banned once again.
- Cinemas and theatres will also have capacity reduced by 50 per cent.
- All tournaments and competitions suspended as of Monday, with reduced capacity of gyms and other indoor training facilities.

"If everyone does their part, we can get through this together," Legault said.

Legault said there will be support offered to businesses affected by the public health measures, as there was in previous stages of the pandemic.

Booster Campaign Speeds Up

As of Monday, December 20, people 65 and over will be able to make an appointment for a booster shot, Health Minister Christian Dubé said. People with certain health conditions aged 60 and up will also be eligible.

The Monday after that, December 27, all people 60 and up will be able to make an appointment.

From there, the aim is to begin offering the rest of the population booster shots in the New Year.

There was no mention of barring travel into Quebec from other provinces as was done in the past.

However, Legault is not ruling out further restrictions. Asked if the province will re-instate the curfew, he said officials believe the current rules will be enough, but next week may be different.

"We may have to adjust our measures," said Legault.

Legault said, as of Monday, December 20, rapid tests will be available in pharmacies. However, people should stay home if they have symptoms, and get a PCR test.

Cases On The Rise

Legault said preliminary data show the province expects to report almost 3,700 cases on Friday, December 17.

It reported 2,736 on Thursday, December 16 — its highest daily total since January 3, when the province was plunged in the virus's second wave.

On Wednesday, December 15, there were 2,386 new infections. The seven-day rolling average for cases has jumped to 2,035.

In the past week, the number of people in Quebec hospitals due to COVID-19 has gone from 255 to 309.

Dubé said about half of people requiring hospitalization are double vaccinated, while up to 80 per cent of people in intensive care are not vaccinated.

He said the decline of the vaccine's efficacy over time is to blame, though it is helping to keep people out of intensive care. This shows the importance of getting a third dose of the vaccine, he said.

As the number of cases continues to climb, hospitalizations could shoot up in the coming weeks, according to the latest projections from the provincial government's health care research institute, known by its French acronym INESSS.

They show that as many as 700 Quebecers could be in hospital due to the virus by early January, with about 160 of them in intensive care.

Dr. François Marquis, head of intensive care at Montreal's Maisonneuve-Rosemont Hospital, says soaring cases could lead to a situation like that of the first wave.

"Yes, we're better at treating the patients, and we know the virus much more, but the sheer numbers of patients, that could be just enough to tip the balance," he said.

Marquis says the health-care system has been preparing for another spike in hospitalizations, but he and his colleagues across Quebec won't be able to handle the fourth wave on their own.

"We rely on the people to follow the rules," he said. "We have to work as a team, the hospitals will not be enough by themselves."

Limiting contacts and closely monitoring for symptoms will be crucial this year because the Omicron variant spreads so quickly, said Marquis.

"Basically Omicron starts being contagious much earlier in the disease," he said.

"For the holidays, you have to make sure that if you have the slightest symptoms, don't go to a party, don't go to a gathering, get tested."

'Unnecessary Disruption And Chaos': Travel Sector Livid As Ottawa Issues New Advisory

By Christopher Reynolds, The Canadian Press, December 15, 2021

['Unnecessary disruption and chaos': Travel sector livid as Ottawa issues new advisory \(msn.com\)](#)

The travel and hospitality sector was left reeling on Wednesday, December 15 after the federal government warned against non-essential trips abroad due to alarming numbers of COVID-19 cases.

WestJet CEO Harry Taylor railed against the advisory, predicting it will create "unnecessary disruption and chaos" ahead of the holiday travel season.

"Fully vaccinated Canadians should not be singled out for choosing to take part in a safe activity," Taylor said in a statement.

"Travel bans, restrictions, and blanket advisories are devastating to the continued economic recovery of the country and place tens of thousands of recently recalled Canadian travel and tourism jobs at risk."

He also claimed the government's warning is "not based on science and data," adding that Canada's travel measures fall out of step with border policies in the European Union, United Kingdom, and United States. He is calling on the government to publicly share the COVID-19 data that informed Wednesday, December 15's advisory.

His statement came after a news conference in Ottawa where Health Minister Jean-Yves Duclos said the Omicron variant is now spreading in Canadian communities and across the globe, prompting a new advisory less than two months after the old one was lifted.

Duclos said the situation became more complicated at a pace he "couldn't have imagined" a few weeks ago.

"To those who were planning to travel, I say very clearly, now is not the time to travel," he said on Wednesday, December 15.

"I know this is difficult for airlines, for travel agencies, for families, for people who haven't been able to see each other for a long time," Duclos added in French.

He would not offer advice on domestic travel, adding that any travel restrictions within Canada will come from provincial governments, but Prime Minister Justin Trudeau urged Canadians to be cautious when making their travel plans.

"I understand this sucks," Trudeau said on Wednesday, December 15. "The reality is Omicron is here in Canada, and we have to cut down community spread."

Airline customers have been cancelling bookings by the thousands, said Air Transport Association of Canada CEO John McKenna.

"They're cancelling because they don't know what to expect when they come back," he said in an interview.

"I think they're more afraid of the bureaucracy than of Omicron."

A decline in international trips will likely prompt a slowdown in regional ones, since the two feed into one another, and anxiety over the highly transmissible strain will further discourage domestic travel, he said.

Federal ministers warned on Wednesday, December 15 that more measures at the border could still be on the way, and did not rule out the possibility of reinstating the requirement for travellers who leave the country for less than 72 hours to complete a molecular COVID-19 test in order to re-enter the country.

Currently, Canada has banned all foreign nationals who have been in 10 specific African countries in the last 14 days from entering the country to offset the threat of importing Omicron cases. That policy should be re-examined, chief public health officer Dr. Theresa Tam said on Wednesday, December 15. Duclos hinted the government may "clarify" that policy soon.

"We give our best advice. At the end of the day, decision-makers make their decisions," added Tam deputy Dr. Howard Njoo.

The positivity rate among fully vaccinated travellers arriving by air was 0.17 per cent the week of November 14 to 20, and 0.00 per cent the following week, according to the Public Health Agency of Canada. Land arrivals had comparable figures.

"That was the promise behind the vaccination mandate and the promise behind testing," WestJet vice-president of government relations Andy Gibbons said in a phone interview.

"If we shift backwards to 14-day quarantines or blanket policies, then we reverse that progress."

He noted that virtually no activity outside of international travel demands proof of a negative molecular test from fully vaccinated individuals.

Confusion around travel measures and shifting rules and guidance from the federal and provincial governments also remains a problem, Gibbons added.

The Association of Canadian Travel Agencies said the new advisory will have a "devastating impact" on its 14,000 agents, who depend on holiday travel to bolster business.

The trade group is urging Ottawa to communicate advisories and border measures clearly and quickly on a single website and work more closely with industry.

About 87 per cent of Canadians aged 12 and over are fully inoculated, with airport testing also ramping up.

Travel insurance plans continue to cover COVID-19 costs at no extra charge and with virtually no cap on expenditures if a traveller winds up in hospital, said Marty Firestone, president of Travel Secure, a Toronto-based company that specializes in travel insurance.

"The insurers are themselves telling you they see little risk ... if you're fully vaccinated," he said.

Airline And Hospitality Sector Winces Anew As New Border Rules Clamp Down On Travel — Again

Westjet CEO Says Travel Advisory Will Create 'Unnecessary Disruption And Chaos'

By The Canadian Press, December 16, 2021

<https://www.cbc.ca/news/business/travel-border-airlines-1.6288742>

Canada's travel and hospitality sector has been left reeling by the federal government warning against non-essential trips abroad due to alarming numbers of COVID-19 cases.

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"I know this is difficult for airlines, for travel agencies, for families, for people who haven't been able to see each other for a long time," Duclos added in French.

He would not offer advice on domestic travel, adding that any travel restrictions within Canada will come from provincial governments, but Prime Minister Justin Trudeau urged Canadians to be cautious when making their travel plans.

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"The insurers are themselves telling you they see little risk ... if you're fully vaccinated," he said.

Travellers Face Tough Choices Amid Surge In COVID-19 Cases

By Eric Atkins and Clare O'Hara, *The Globe and Mail*, December 16, 2021

<https://www.theglobeandmail.com/business/article-travellers-face-tough-choices-amid-surge-in-COVID-19-cases/>

Canadians longing for holiday getaways face a tough choice: take trips and risk catching COVID-19 or being locked down far from home, or cancel and be stuck with vouchers for future travel instead of cash refunds.

The federal government said on Thursday, December 16 that Canadians should not go abroad over the holidays. The official advisory discourages travel but doesn't ban it. It's a move intended to slow the spread of the Omicron variant of COVID-19, which is causing case counts to soar and threatening to overwhelm the health care system.

Airlines say customers who cancel their flights will not receive cash back, but rather credits toward future trips. The only customers who are guaranteed to be able to recover their money are those who paid extra for cancellation privileges on their tickets, or whose flights are cancelled by the airlines.

Even people who bought cancellation insurance, which pays for some of the non-refundable costs of abandoning a trip, may find that their policies won't cover them if they call off travel because of the advisory.

Colin MacEachern, 53, a teacher in Halifax, has a WestJet Airlines ticket to Orlando, Florida, for December 23. He had planned to spend a week exploring the Gulf Coast with an eye to living there when he retires in two years.

He said he is confused by the federal government's message, and isn't sure if he should cancel his plans.

"If they had said, 'Don't go,' I would have appreciated that more than this vague directive where they're almost being ... threatening. You know, 'We can't guarantee we're not going to lock you down in Florida,'" he said. "I have spoken to a lot of people who just say, 'Go.'"

Customers who cancelled flights because of the pandemic between February 2020, and April 2021 were eligible to get their money back from Air Canada and Air Transat, because both companies agreed to provide refunds as a condition of financial aid from taxpayers. But those policies are no longer in place. (WestJet did not take a government bailout and did not provide refunds.)

Morgan Bell, a spokesperson for WestJet, said it's too soon to say if customers will heed the government's advice and stay home in large numbers. But she noted that Canadians flew through the summer and fall, when an earlier travel advisory was in place.

The airline is getting a high number of calls from customers and is expecting some cancellations, Ms. Bell said. But, she added, "we're optimistic bookings will hold strong."

Brad Cicero, a spokesperson for Porter Airlines, said new bookings are still coming in and the “vast majority” of passengers are sticking with their travel plans.

“There are no significant flight schedule changes planned beyond typical seasonal adjustments and ongoing refinements that are part of regular business,” Mr. Cicero said.

Air Canada spokesperson Peter Fitzpatrick said customers who want to cancel or change their flights should do so where they booked, whether it was online or with a travel agency.

Travel insurance providers are taking different stances on what the government advisory means for both out-of-country medical insurance and trip-cancellation policies. This is creating an “information nightmare,” Martin Firestone, president of the travel insurance brokerage Travel Secure, said in an interview on Thursday, December 16.

“Once again, the travel advisory has left the industry scrambling and changes are happening minute-by-minute among insurance companies,” he said.

“There is a lot of confusion among both Canadians who are already abroad not knowing if they still have medical coverage, and others who have plans to leave the country for the holidays.”

Canada’s largest insurer, Manulife Financial Corp., told its travel insurance agents on Thursday, December 16 that because of the new travel advisory, the majority of its individual travel policies for emergency medical care will no longer cover COVID-19-related medical claims made on trips with departures after December 17. The company is allowing customers affected by the change to request refunds prior to their travel dates.

For an additional cost, travellers can buy a pandemic travel plan from Manulife, which provides coverage for COVID-19-related medical emergencies even while an advisory is in effect.

Allianz Global Assistance Canada policy holders who contract COVID-19 at their destinations will also not be eligible for emergency medical treatment or trip interruption coverage while the travel advisory is in place. Travellers can buy extra COVID-19 coverage for an additional cost.

Any Allianz-Assistance trip-cancellation policies purchased after March 11, 2020 will not pay out claims to people who cancel only because of the travel advisory, because the pandemic “remains a known event,” spokesperson Julia Koene said in an e-mail.

TuGo travel insurance offers coverage if a traveller must cancel or interrupt their trip because of a medical condition related to COVID-19, or because of a mandatory quarantine.

But TuGo’s chief customer officer, Brad Dance, said this type of policy “does not provide coverage if an individual has to cancel due to travel advisories, border closures, or for someone not wanting to travel due to COVID-19 case levels.”

Travellers can buy a “Cancel for Any Reason” add-on to their cancellation policy, Mr. Dance said, which covers 50 per cent of prepaid, unused non-refundable travel costs if a trip is cancelled more than five days before departure.

TD Insurance said its Travel Trip Cancellation policy will cover any cancellations because of COVID-19 – including cancellations related to border closings and travel advisories – for trips that were booked between October 21 and December 15, prior to the latest advisory.

For trips that were booked on or after December 16, however, travellers are not eligible for cancellation coverage.

“Any trips booked after the Level 3 advisory was reinstated, and while this advisory is in effect, will not be eligible for trip cancellation coverage,” TD spokesperson Paolo Pasquini said in an e-mail.

Travellers Nervous As Omicron Cases Surge, But Pushing Ahead With Plans

By The Canadian Press, December 16, 2021

<https://www.ctvnews.ca/health/coronavirus/travellers-nervous-as-omicron-cases-surge-but-pushing-ahead-with-plans-1.5710152>

Some travellers heading out of Canada on Thursday, December 16 said they're worried about surging COVID-19 cases, but are forging ahead with their plans despite the federal government warning against non-essential international travel.

Sanjay Mahar said he is heading to India from Toronto to see his family for the first time in years, having booked the trip a few months ago when case counts were low and vaccination rates high.

On Wednesday, December 15, Prime Minister Justin Trudeau urged Canadians to avoid international travel as the Omicron variant of COVID-19 has caused cases to spike in recent days.

"It was upsetting to hear the prime minister say that, but I understand the concern," he said at Toronto Pearson Airport.

"I thought a lot about it last night, called the airline, but couldn't get through so it wasn't clear if I could get any money back."

But after talking it over with his wife in Mississauga, Ontario, and his parents, he decided to go.

"My dad's health is poor and I do really want to see him," he said, his voice trailing off.

"What if I didn't go and I never saw him again? It's a risk, but I decided to take it."

Jennifer Johnson waited in line to have her temperature checked before heading to security.

She was off to see her daughter in Boston so they could be together for the holidays.

"We thought we were in the clear just last month, being fully vaccinated and life slowly returning to what it used to be, so I booked the flight," Johnson said.

"I'm still going, but we are talking about cancelling my return flight and driving back to Canada."

Sunil Dev kissed his wife and little girls as he dropped them off at the airport so they could return home to Delhi.

They had been visiting him on vacation while he works on a contract in Toronto.

"We're worried, for sure, and it's a long flight, but, really, we have no choice, they must go home," he said.

The family is thinking about moving to Canada and this break was a chance to get to know the country better.

"Listening to the news and the prime minister yesterday, we got more worried, but we are also a family and seeing my children has given me great joy," he said.

"I now just hope, hope, hope the flight goes OK and COVID-19 doesn't appear."

A few hundred kilometres away, in the border city of Windsor, Ontario, Mayor Drew Dilkens said he's "delighted" that the federal government didn't take further measures to restrict Canada-U.S. land border access.

"The land border closure made life very, very difficult," he said.

"It took an emotional toll on people on both sides of the border who were disconnected."

Dilkens said the restrictions that are currently in place are "basically the gold standard" and that he believes people who have planned trips to the U.S. will mostly follow through, but will take precautionary measures to protect themselves from COVID-19.

"I think the whole situation is a little frustrating for everyone, especially those that are fully vaccinated," said Dilkens. "But smart and reasonable people get that this is likely to continue for several years and we're going to have to be able to adjust and adapt to the circumstances."

As chair of the Windsor-Detroit Tunnel Commission, Dilkens noted that while the land border remains open, there hasn't been a dramatic increase in traffic at the tunnel since it opened last month.

"So it's not like even with the border open, people are choosing to cross in great numbers," he said.

Avoid All Non-Essential Travel, Government Now Advising. What Does That Mean For My Trip?

By Christopher Nardi, National Post, December 16, 2021

[Avoid all non-essential travel, government now advising. What does that mean for my trip? \(msn.com\)](#)

The return of the federal government's advisory to avoid all non-essential travel may seem trivial to some at first, but it could have significant impacts on Canadians' ability to travel insured and even get home.

On Wednesday, December 15, the Liberal government re-instated its formal warning not to travel abroad for non-essential reasons as the world grapples with the rise of the new and rapid spread of the Omicron COVID-19 variant.

But what does that mean, tangibly, for travellers who already have tickets for a vacation in the sun or who have been considering it?

Apart from the obvious warning not to travel for non-essential reasons (the government has yet to formally define "essential" reasons), the first thing that could be impacted by the new travel advisory is travel insurance coverage.

"Canadian travellers should check with their travel insurance provider to see how travel advisories affect their insurance coverage. The decision to travel is the sole responsibility of the individual," Global Affairs Canada (GAC) spokesperson Jason Kung said in an email.

According to the Travel Health Insurance Association of Canada (THIA), a "significant majority" of travel insurance plans in Canada now contain COVID-19 clauses that protect a traveller in case of an upgraded travel advisory warning.

But some still don't, and that can mean that travellers could be left with a nasty bill if their unexpected health expenses abroad aren't covered due to the new advisory.

"Some policies will still exclude coverage if this level of advisory is still in place, yes. However, most (insurers) have decided that is a covered risk that is included in the policy," THIA Executive Director Will McAleer said in an interview.

"And in most cases, individuals haven't had to pay additional costs for that, because most of the travel is only applicable to those who are vaccinated" because Canada requires travellers to be fully vaccinated in order to board a plane or train.

The biggest concern for travellers during these uncertain times remains the possibility of additional measures which could come at any time and significantly impact flight availability, the federal agency warns.

“Additional travel restrictions can be imposed suddenly. Airlines can suspend or reduce flights without notice. Travel plans may be severely disrupted, making it difficult to return home,” Kung wrote.

One such way that travel could be severely disrupted is if many Canadians who had already made plans to fly out of the country before the new travel advisory decide to cancel their tickets. That could lead to outbound flights from Canada being cancelled, which means that the subsequent inbound flight back would also suffer the same fate.

That could leave Canadians stranded abroad for longer than expected, something that was seen often during the early months of the pandemic in 2020.

Though GAC says it remains available to assist all Canadians in need of consular assistance, Foreign Affairs Minister Mélanie Joly has repeatedly said that the government will not be organizing evacuation flights for stranded non-essential travellers like it did in the first few weeks of the pandemic.

That scenario is all the more possible now that most travel insurance plans now include cancellation clauses in the event of a travel advisory change, says Kevin Dorse, assistant vice president at the Canadian Life and Health Insurance Association.

“Insurers monitor the Government of Canada’s international travel advisories closely because they have a practical effect on trip cancellation insurance,” Dorse said in an email.

“Most trip cancellation policies have a travel advisory clause. This allows a refund for eligible expenses for any reason once the federal government issues an ‘Avoid non-essential travel,’ or the higher ‘Avoid all travel’ advisory for the relevant destination,” he added.

International Travel Advisory Won’t Stop Omicron Spread, Scientists Say

By Leslie Young, Global News, December 16, 2021

<https://globalnews.ca/news/8456800/omicron-travel-advisory-ban-science/>

The federal government is again advising Canadians to refrain from international travel due to COVID-19 – but many experts say the measure is too little, too late.

“These restrictions don’t keep variants out,” said Dr. Neil Rau, an infectious diseases specialist with Halton Healthcare Services.

“We’ve already had experience with three other major variants that were not stopped, either, while we had very strict travel practices or restrictions for foreigners and for Canadians,” he said.

“Now we’re imposing a restriction when Omicron is already well-established in Canada. There is no point telling people not to travel for the sake of Omicron when it’s already here.”

On Wednesday, December 15, federal health minister Jean-Yves Duclos said “now is not the time to travel,” announcing an official advisory recommending that Canadians avoid all non-essential international travel, given the spread of the Omicron variant of COVID-19.

This was being done both to protect travellers and to protect the health system from being overwhelmed, he said.

Julianne Piper, a research fellow and project co-ordinator with the Pandemics and Borders project at Simon Fraser University, agrees with Rau.

“I think there is little evidence at this point that a travel advisory will have an impact,” she said.

“Obviously, it’s not going to prevent the importation of the Omicron virus.

“It’s already here.”

Nazeem Muhajarine, an epidemiologist and professor at the University of Saskatchewan, is a bit less adamant.

“There’s not a whole lot of solid evidence to support this but it is a logical measure with an aim to reduce volume and reduce people and to regain capacity to do some of the other, more effective things like testing,” he said.

Temporarily limiting the volume of travellers, he said, might help reduce the number of Omicron cases Canada has to deal with, which could in turn help hospitals. Because of Omicron’s ability to spread exponentially, he thinks, this could matter.

“It’s actually quite something to note, with each person potentially being able to pass on to four people, and then each of those four people being able to pass it on to another four,” he said.

Jason Kindrachuk, a virologist and Canada Research Chair in emerging viruses at the University of Manitoba, agrees that it’s too late to stop importation of the virus into Canada. He wonders, though, if it can still be stopped from spreading throughout the country.

“Travel restrictions can be beneficial if enacted early enough to blunt or stop seeding of a virus into various communities prior to community transmission taking over,” he said.

“The question now is whether international restrictions will limit that and what are the concerns regarding additional distribution of Omicron across Canada through inter-provincial travel.”

When it comes to the federal travel advisory, Piper isn’t sure how many people will actually listen to the advice to stay home.

“It’s 10 days before the holidays. People have made plans already,” she said.

She still thinks that it’s a “well-founded” travel advisory.

“Travelling internationally right now, there’s not only a risk to your personal and sort of family health, meaning the risk of becoming infected with the virus and potentially being hospitalized in a foreign country,” she said.

“There’s also a risk that you’ll get caught up with these ever-changing and sometimes quickly-changing travel measures, not only by the Canadian government but also by whichever countries you might be transiting through or the country of destination.”

On the other hand, she said, the restrictions on travel from a handful of southern African countries, which still remain on the books, are not valid.

“I don’t think it made a lot of sense, even when it was implemented a few weeks ago,” she said.

“At this stage, we see that the Omicron coronavirus variant has been identified in many countries around the world and, to be frank, I don’t think that the targeted measures at this stage will have a significant effect.”

Kerry Bowman, a bioethicist with the University of Toronto, would like to see a more detailed explanation from the federal government as to why this advisory was put in place.

“You really have an obligation ethically, if you’re going to restrict freedom of movement, to explain to people exactly how this decision was made. We people have a right to know,” he said.

“I feel we’ve become so desensitized to major decisions that really restrict people’s lives. We’re so accustomed to it now that we don’t even expect explanations anymore. And I worry about that a lot.”

COVID-19-Related Travel Insurance Not Guaranteed For Trips Abroad: Specialist

By Rosanna Hempel, Global News, December 16, 2021

<https://globalnews.ca/news/8457439/omicron-COVID-19-international-travel-insurance/>

A travel insurance specialist is warning travellers to take extra precautions if they’re planning a trip abroad, as the Omicron COVID-19 variant continues to surge around the world.

Canada’s new foreign travel advisory is causing “incredible issues” and “nightmare” scenarios for travellers, pushing some insurers to bring back a top-up pandemic plan rider for travellers who want to be covered for COVID-19-related expenses, Travel Secure president Martin Firestone told 680 CJOB on Thursday, December 16.

Firestone says his company has been swamped with calls from concerned clients wondering whether their contracts still hold.

Anyone already on their trip should be covered if they obtained insurance, he said, but those yet to travel out of the country should check with their insurer to make sure their policies aren't voided.

"Some insurers, I will warn you right now, have suggested that if you're purchasing a policy after the advisory's been put in place, which is December 15, that you will not be covered for COVID-19 and you need to either purchase a rider, a pandemic plan rider, or nothing is available period," Firestone said.

"You have to be careful here because the last thing you want to do is go away, get COVID-19, and then call your government and say, 'Please help me. I need help.' And then you know what they're going to tell you, because they told you not to go."

"Be very careful."

People leaving the country should also watch for cancellation policies, Firestone said.

"If you're cancelling trips, or planning trips and putting down deposits, look to the end user for help to get a refund – not a credit – if you can't go because you can't get to that country. So (ask) the airlines, 'Can I cancel within 48 hours to get my money back, not a credit?' To the AirBnB, to the tour company, to the hotel, 'Will you give me back a refund if in fact I can't make it there?'"

Travelling For The Holidays? Experts Say Insurance Is A Must

By Anthony Vasquez-Peddie, CTV News, December 16, 2021

<https://www.ctvnews.ca/health/coronavirus/travelling-for-the-holidays-experts-say-insurance-is-a-must-1.5710896>

Canadians who are still considering travel this holiday season may want to think more carefully about getting travel insurance and what their coverage includes amid the spread of the COVID-19 Omicron variant.

Experts say travel insurance is important to ensure coverage for any medical mishaps abroad, but it has taken on extra meaning during the pandemic because health and travel conditions can change suddenly.

Omicron also has some in the travel industry divided over whether or not people should be planning international trips right now.

The federal government, for its part, advised against non-essential international travel on Wednesday, December 15, but that may not stop Canadians from leaving the country to visit friends and loved ones.

"If you must, it's important that you travel with insurance and travel insurance specifically obviously [to cover you] both medically as well as for your trip," Omar Kaywan, co-founder of Goose Insurance, told CTV News Channel on Thursday, December 16.

When shopping for travel insurance, Kaywan recommends reading the terms of your plan carefully before purchasing to ensure you get the appropriate coverage.

"Every single policy wording is different," he said. "We recommend to all Canadians before purchasing any policies to review the policy wording."

Particularly, Kaywan recommends three types of coverage related to COVID-19.

First, travellers should get insurance that covers any hospitalization costs incurred should they suffer from severe symptoms during their trip.

"Omicron, being a very contagious variant, the number one priority for a lot of Canadians is and should be COVID-19 insurance in terms of the medical component," he said.

Next, if you run into any unexpected issues, including sudden changes to border restrictions, and you've already purchased a non-refundable plane ticket, some companies offer trip cancellation insurance to reimburse your airfare, Kaywan says.

Finally, travellers who enter another country and test positive for COVID-19 may want insurance to cover any quarantine expenditures.

"[If] I have to self-isolate and quarantine for 14 days, do I have the insurance to cover me for those accommodation expenses?" Kaywan said.

Currently, for the return trip, fully vaccinated Canadians and permanent residents coming home after short trips of 72 hours or less to the United States and abroad do not have to provide proof of a negative molecular test, such as a PCR test.

For longer trips, anyone coming into Canada from international locations is required to have a negative PCR test within 72 hours of their scheduled departure in order to board the aircraft and to avoid a potential 14-day quarantine when they arrive.

We Have The Tools To Combat Omicron And Preserve Personal Freedoms. Now We Need The Political Will

Opinion By Brooks Fallis, Special to The Globe and Mail, December 13, 2021. Brooks Fallis is a critical care physician and the former medical director and division head of critical care at the William Osler Health System.

<https://www.theglobeandmail.com/opinion/article-we-have-the-tools-to-combat-omicron-and-preserve-personal-freedoms-now/>

It's just like the flu. About 99 per cent of people are fine after infection. It does not spread in schools. It does not hurt children. The vaccine will end the pandemic. Herd immunity is nearly here. Only hospitalizations really matter.

All mainstream messages. All wrong.

The latest message? The new wave of COVID-19 cases driven by the Omicron variant might be mild. The truth is that SARS-CoV2 is a nasty virus, and we continue to underestimate it.

We have the tools to combat Omicron, but we currently lack the will. It's time to hold politicians to account and demand a better response.

Vaccines have been working remarkably well and remain the best way to prevent severe disease. Every Canadian should take every dose they are eligible to receive, and Canada should also be working to vaccinate other countries around the world.

Despite vaccines, the arrival of Omicron is daunting for a few reasons: the new variant has greater immune evasion than other versions of the virus, population immunity from second doses is waning, the administration of third doses has been regrettably slow, and our health care system is fragile and understaffed.

Most importantly, Omicron has an explosive rate of growth, with cases doubling every two to three days. Spread will be fast and extremely hard to control.

Three features of SARS-CoV2 transmission run counter to our inherent mental model of infections, but are vital to understand. First, there's pre-symptomatic transmission, which refers to the ability of the virus to be spread by people who feel completely normal and have no idea they are sick. Without broad recognition of this aspect of transmission, we will always struggle to contain COVID-19.

Next, the airborne factor. The virus is primarily transmitted by breathing in small particles (aerosols) that float in the air like smoke after being exhaled by an infected person. Infectious aerosols accumulate in indoor, poorly ventilated spaces. The virus is not primarily spread by large respiratory particles from coughing and sneezing (droplets), unwashed hands (contact) or unsanitized objects or surfaces (fomites).

Finally, there's over-dispersion, a term that describes the tendency for roughly 80 per cent of future cases to come from only about 10 to 20 per cent of current cases. Some people minimally spread the virus while others exhale infectious aerosols like ash from an erupting volcano.

The combination of these three features drives super-spreader events and infection clusters, which in turn drive the pandemic. Omicron is putting these processes into overdrive. Rather than watching cases rise exponentially, is it not preferable to make immediate changes in exchange for better pandemic control, preservation of the health care system, and avoidance of death and chronic disease?

Public health groups, including the World Health Organization, initially espoused the idea that COVID-19 spreads through droplets. They have since resisted educating the public about airborne transmission or meaningfully altering their guidance. Now that we know about the airborne threat, our long-term goal should be to upgrade ventilation and filtration in all indoor spaces.

But it is impossible to upgrade every building quickly. We need to risk-stratify these spaces by the types of activities performed there, the number of people present and the feasibility of continuous N95 respirator masking.

Indoor workplaces where close contact is unavoidable – such as factories, warehouses, meat-packing plants, long-term care homes, and hospitals – should shift to continuous respirator mask use. Each workplace also needs to provide large “safe rooms” with upgraded ventilation and filtration, with enough space for distancing so that masks can be safely removed during breaks.

Upgrading ventilation and filtration should be done primarily in places where continuous masking is impossible (restaurants, bars, congregate living environments) or challenging (daycares, schools). Any indoor space where masks will be removed needs government-mandated ventilation standards, and government subsidies to help it meet those standards quickly.

Rapid testing should become standard immediately prior to entering any indoor space where masks will be removed, including restaurants, bars, and in-home gatherings of different households. This would require governments to make massive volumes of rapid tests easily available, free of charge. In addition, regular screening through rapid testing three times weekly would help keep the virus out of schools, which are the most challenging infection-control environment.

Rapid tests can help find the most infectious pre-symptomatic people before they enter these places.

An aggressive approach to public education coupled with transmission reduction and a high vaccination rate is our best chance to combat Omicron. The point of these interventions is not to restrict personal freedoms. It's to preserve them, and prevent lockdowns or heavier restrictions.

By stopping transmission before it happens, schools, hospitals, and businesses could remain open and functional.

Canadians Are Staying At Home For Christmas; You Can Count On That

By Dave McGinn, The Globe and Mail, December 11, 2021

<https://www.theglobeandmail.com/canada/article-theyll-be-home-for-christmas-you-can-count-on-that/>

Lori Laumbach and her husband will be staying at home in Edmonton over the holidays, where they will have Christmas dinner with her parents and otherwise forgo any gatherings. This is partly because it seems like the safe thing to do, and partly because she doesn't want to jeopardize a trip they have booked to the Dominican Republic in January.

“Other years, often we would go and join some other friends at house parties, but I think that still doesn't seem like the responsible thing to do right now, especially because I want to go away,” says Ms. Laumbach, who runs a children's entertainment company.

The trip, originally booked for early 2020 and their first since the fall of 2019, isn't just a break from work for her and her husband, who is in law enforcement, but a much-needed reprieve from the stress of the pandemic, Ms. Laumbach says.

“It’s the mental-health break of just not having to watch the numbers every day.”

As a second COVID-19 holiday season approaches, this one amid concern and uncertainty over the Omicron variant, some Canadians say they need an escape from pandemic life and are planning small gatherings, staycations, and even travel to far-flung destinations. But those plans may change depending on what we learn about Omicron in the coming weeks.

The desire to celebrate with friends and family is understandable, but Stephen Hoption Cann, a clinical professor in the School of Population and Public Health at the University of British Columbia, says people should exercise the utmost caution given what we already do know about the new variant.

“Unfortunately, a Christmas gathering is kind of the ideal setting to spread this variant. You’ve got people at the table, without their masks, exposed to each other for prolonged periods in indoor settings,” he says. “Obviously, the smaller the group the better. The less likely you’re going to have one person in that group that has the virus. But it only takes one to spread it to everybody else.”

Dr. Hoption Cann points to a corporate Christmas party last month in Oslo, where 19 attendees have since tested positive for the Omicron variant despite the fact that everyone was vaccinated and tested negative prior to the event.

His advice to anyone planning on attending holiday celebrations this year? “Limit your numbers and check symptoms beforehand.”

Up until a few weeks ago, Debbie Lee, a doctor of traditional Chinese medicine who lives in Vancouver, was considering flying to Ontario to spend the holidays with family. But the risk of getting COVID-19 – and the fallout of what would happen if she or anyone in her family did – persuaded her to stay put.

“It’s moreso what comes with it – the isolation, the loss of work,” she says.

Ms. Lee, her husband, and their two children, 5 and 3, have twice had to self-isolate already because the kids were exposed to friends who tested positive for the virus.

“Now, I’m super uptight about what we do,” she says.

Instead of getting on a plane, Ms. Lee booked two days at a hotel in downtown Vancouver, where her kids can swim in the pool and she and her husband can pretend, if only briefly, that life is normal.

“I’m in dire need of a change,” she says. “I would love to be on a beach in Hawaii. But that’s not going to be an option, so what’s the next option that will make my brain think that I am in a normal state of life?”

On New Year’s Eve, they may visit with family who have been in their bubble since the pandemic began, but it depends on what she learns about Omicron, Ms. Lee says.

Kelly Gaudreau, a personal support worker in long-term care, plans on having a small family gathering limited to 10 people for Christmas dinner at his home in Leamington, Ontario.

“We used to have larger gatherings,” he says. Mr. Gaudreau and his wife also used to have people over to the house for a New Year’s party. They didn’t last year, and won’t again this year.

Christmas dinner, with everyone double-vaccinated, will be a welcome evening of close to normal life, Mr. Gaudreau says.

“That’s one thing I enjoy about having family over – family that you know are vaccinated – is that feeling of not thinking about the whole pandemic. I definitely want things to be back to normal.”

He and his family were debating a trip to Cuba in February but decided against it because of the possibility of having to quarantine upon their return.

The emergence of the Omicron variant seems to have had a similarly chilling effect on many Canadians’ plans to travel this holiday season.

“Two or three weeks ago, I would have said things are looking brighter,” says Richard Smart, president and chief executive officer of the Travel Industry Council of Ontario, a non-profit organization. “We’ve done consumer surveys and we know a high percentage of consumers were looking forward to travelling soon, and soon meaning over the holiday season, March break, and over the summer.”

But now, uncertainty means many people are second-guessing their travels plans, Mr. Smart says.

“The brakes have kind of been put on in the last couple of weeks. Nobody really knows what to think about Omicron.”

Anyone considering booking a trip should read the fine print carefully and make sure to get travel insurance, including trip cancellation, trip interruption, and out-of-province medical insurance, Mr. Smart says. “Travel insurance is critical.”

Ms. Laumbach has double-checked her travel insurance, particularly because she is losing faith that the vacation to Punta Cana will happen given the emergence of Omicron.

“I’m not getting my hopes up for this trip because I don’t have the confidence that things aren’t going to go south quickly again,” she says.

Over 60% Of Canadians Are In Favour Of Closing The Us Border Again Due To Omicron Variant

By Narcity, December 13, 2021

<https://www.msn.com/en-ca/news/canada/over-60-of-canadians-are-in-favour-of-closing-the-us-border-again-due-to-omicron-variant/ar-AARMjSC?ocid=msedgdhp&pc=U531>

According to a recent survey, the majority of Canadians polled want to strengthen certain public health measures across the country now that the Omicron variant has reared its ugly head — but their American counterparts aren't quite as enthusiastic about it.

Leger's North American Tracker survey revealed Canadian and American perspectives on the COVID-19 Omicron variant, and it looks like the two countries aren't totally unanimous on their ideas about the border.

The survey polled 1,547 Canadians and 1,004 Americans between December 3 and December 5, 2021, and the results showed that 65% of Canadians think that the border between the Great White North and our neighbours to the south should be closed for a period of time due to the Omicron variant.

On the other hand, only 57% of Americans think the Canada-U.S. border should be closed.

But that's not the only thing respondents were asked to weigh in on.

According to Leger, Canadians (78%) are more in favour of the government speeding up plans for third doses or booster shots of the COVID-19 vaccine for certain groups than Americans are (63%).

When it comes to mandatory vaccination for everyone (except babies and those with medical exemptions) in the country, 64% of Canadians are for it, while less than 49% of Americans support it.

In somewhat grimmer news, while both 38% of Canadian and American polling participants think the worst of the crisis is behind us, 21% of Canadians think the worst is yet to come, as do 27% of Americans.

And in terms of lifting all COVID-19 restrictions entirely, 32% of American respondents support it while only 18% of those from Canada are for it.

As for what Canadians are thinking about in anticipation of the holiday season, 60% of Canadians said they won't have unvaccinated family and friends over for festivities in an earlier survey in November.

Also, just 32% of Canadian respondents said they would accept an invitation to a holiday gathering if there were unvaccinated people there.

Conservative MPs Free To Travel Internationally, Liberal, NDP MPs Must Stay Home

By Stephanie Taylor, The Canadian Press, December 15, 2021

[Conservative MPs free to travel internationally, Liberal, NDP MPs must stay home \(msn.com\)](#)

Conservative MPs will be free to travel internationally over the holidays while their Liberal and NDP counterparts have been told to stay home.

Politicians jet-setting to different vacation destinations drew much attention last year as federal and provincial governments told Canadians to forgo their travel and gathering plans to combat rising COVID-19 caseloads.

The federal Liberal government issued on Wednesday, December 15 a new advisory urging Canadians to avoid non-essential international travel because of the threat posed by the highly contagious Omicron variant.

A Liberal official said the governing party's MPs have been informed that they are to abide by the public health advice and avoid non-essential international travel.

Liberal House Leader Mark Holland told The Canadian Press he has already cancelled a planned international trip to celebrate a family member's 70th birthday in January, and is cutting back on plans to have a Christmas gathering with more than 20 people.

NDP whip Rachel Blaney said her caucus has also been advised to avoid non-essential international travel, adding that "Canadians expect elected officials to lead by example by following the rules."

"Canadians are tired and understandably disappointed that we're not yet out of the pandemic but it's more important than ever to follow public health advice to keep each other safe," Blaney said in a statement.

But Conservative Leader Erin O'Toole's office said there is no international travel ban in place and the advisory is meant only to help those who are vaccinated make informed decisions about their travel plans.

"This applies to MPs and all Canadians," O'Toole's communications director, Josie Sabatino, said in a statement. "As such, members of the Conservative caucus can continue to travel internationally."

She pointed out that earlier this year Prime Minister Justin Trudeau and his cabinet travelled internationally at different times when a similar advisory was in place.

The different approaches federal parties are taking to travel amid the threat of the Omicron variant mirrors the varying positions they've taken on how the House of Commons should function amid the ongoing pandemic.

Conservatives, along with the Bloc Québécois, were adamant that the House should fully return to normal in-person sittings, arguing that giving MPs the option to participate virtually would give ministers an excuse to dodge opposition scrutiny.

Liberals joined forces with New Democrats last month to resume the hybrid format. And, with the Omicron variant spreading like wildfire, both those parties began on Wednesday, December 15 to limit the number of their MPs in the Commons chamber, after holding entirely virtual caucus meetings.

Conservative and Bloc caucuses met in-person. And the Conservative benches in the House were full on Wednesday, December 15.

Outside of the Conservatives' caucus meeting, Nova Scotia MP Dr. Stephen Ellis, whom O'Toole has picked to help develop the Tories' response to the pandemic, argued that decisions being made to deal with Omicron are premature because the science about its virulence isn't yet conclusive.

He suggested Canadians have to learn to live with COVID-19.

"Am I going to live the rest of my life like this?" Ellis said. "That's the question."

As Pandemic Uncertainty Rises, Should You Pay Extra For Refundable Airline Tickets?

By Jacob Lorinc, Toronto Star, December 11, 2021

<https://granthshala.com/as-pandemic-uncertainty-rises-should-you-pay-extra-for-refundable-airline-tickets/>

Airlines have a message for travellers planning holiday flights: pay a premium, or risk losing your money if your flight gets cancelled.

With the spread of the Omicron variant, airlines have priced the risk of flight cancellations into their offerings by re-introducing premiums on refundable flight tickets.

And the security of knowing you'll get your money back if your flight is cancelled won't come cheap.

To fly one-way from Toronto to Vancouver in late January with Air Canada, for example, costs \$114 for a non-refundable ticket and \$339 for a refundable ticket — a whopping 197 per cent price increase.

"This is airline pricing 101," said Zach Griff, senior reporter for The Points Guy, a travel website and blog.

Refundable tickets are like built-in insurance policies, said Griff. They cost more, but they ensure that a customer will get their money back if the flight is cancelled.

Travellers intent on flying to countries where the variant is rapidly spreading may be wise to pay the extra fee, said Griff, in the event the airlines are forced again to cancel flights.

The price difference between refundable and non-refundable tickets is nothing new. Airlines have long offered non-refundable tickets at a discount. But the difference temporarily disappeared when customers stopped flying during COVID-19, as few flyers wanted to take the risk of buying non-refundable tickets.

“Airlines could only really offer refundable tickets, because otherwise nobody was going to fly. There was too much uncertainty,” said Ambarish Chandra, an associate professor of economics at the University of Toronto.

While air travel plummeted, airlines offered steep discounts for anyone willing to buy. But flight prices have rebounded, as restrictions lift and travellers make plans for Christmas getaways and trips to warmer destinations.

As of December, flights from Toronto to Vancouver ranged between \$600 and \$1,200 each way for economy flights on Air Canada and West Jet for early January. Last June, one-way flights between Toronto and Vancouver went for as low as \$114.

While little is known about Omicron, governments have already introduced rules on international travel that restrict access to and from countries where the variant is spreading.

Domestic travel is still permitted in Canada, and the border to the U.S. remains open, but travellers looking to purchase plane tickets in the coming weeks will have to contend with the risk that harsh public health restrictions could return.

If you’re planning to travel, experts advise carefully tracking COVID-19 case counts, comparing flight deals, and considering refundable ticket options.

“The airlines drive revenue growth this way — they segment the market by offering refundable tickets that are more expensive, versus non-refundable tickets that are cheaper.”

Travellers hoping to fly in the coming months can monitor flight prices using trackers like Hopper, Skyscanner, and Google Flights, which will issue alerts when deals are available for routes.

Griff says travellers would be smart to book their tickets well in advance — flight prices often spike in the weeks closer to the departure date.

Airports have also experienced surging wait times at international customs, as border agents check proof-of-vaccination documents and testing requirements.

The federal government last week announced new testing rules for those entering the country from outside Canada and the United States. Travellers will now be swabbed upon arrival and required to quarantine until they receive a negative result.

That’s in addition to the already existing pre-departure requirement of a negative PCR test within 72 hours of arriving in Canada.

"Getting to the airport well in advance of your flight is more important than ever right now," said Griff.

More Than 109 Million Americans Expected To Travel For The Holidays, According To AAA

By Alison Fox, Travel+Leisure, December 15, 2021

[More Than 109 Million Americans Expected to Travel for the Holidays, According to AAA \(msn.com\)](#)

More than 109 million Americans are expected to travel for the holidays, according to the American Automobile Association (AAA), despite the emergence of the omicron variant of the coronavirus.

The holiday travel boom represents a nearly 34% increase from 2020 and comes in at 92% of 2019 levels. The overwhelming majority of those set to travel between December 23 and January 2 — more than 100 million — will opt for a road trip, while more than 6 million are expected to fly, and just under 3 million will travel by bus, train, or book a cruise.

"Americans who canceled their vacations in 2020 want to gather with family and friends for the holidays this year, although they will still be mindful of the pandemic and the new omicron variant," Paula Twidale, senior vice president of AAA Travel, said in a statement. "With vaccines widely available, conditions are much different and many people feel a greater level of comfort with travel."

Travelers should expect crowded airports over the holidays with about 2.2 million passengers expected to fly each day, Hopper also shared with Travel + Leisure, representing about 85% of pre-pandemic levels. Domestic bookings for Christmas on the site are up 89% compared to 2020, and up 54% compared to 2019.

December 23 will likely be the busiest day to pass through U.S. airports, followed by January 2 (the Sunday after New Year's), and January 3, according to Hopper. Atlanta is expected to see the most airport traffic, with Los Angeles and Denver rounding out the top three busiest airports for the holidays.

When it comes to a (much needed) vacation, Americans are prioritizing warm weather and fun with Orlando, Florida, and Anaheim, California — both known for their theme parks — taking the two top spots, according to AAA. That was followed by Las Vegas, New York City, and Maui.

But flight prices are rising with demand. Currently, Hopper notes Christmas airfare is seeing an 8% increase for domestic flights compared to 2019, while international fares are seeing a 12% decrease compared to before the pandemic.

Americans Are Finished With COVID-19 But Omicron Is Just Getting Started With Them

Many Americans Were Never Big On COVID-19 Precautions But Now It Seems A Lot Of Other People Have Just Decided, After All This Time, That They're Done With Them, Edward Keenan Writes.

By Edward Keenan, Washington Bureau Chief, Toronto Star, December 15, 2021

<https://www.thestar.com/news/world/2021/12/15/americans-are-finished-with-COVID-19-but-omicron-is-just-getting-started-with-them.html>

Over the past week, Omicron has sent Canada into what feels like COVID-19's 19th nervous breakdown, sounding the alarm that it's time again to batten down the hatches and prepare for looming disaster. At least, that's what I can gather from following news reports, social media, and conversations with family back home: tighter border restrictions, public-service work-from-home orders, schools preparing to go virtual again, contemplated bans on spectators at sporting events. Ontario announced a "wartime footing" for booster shot mobilization.

"This is the scariest it has been since this pandemic started," Dr. Beate Sander, the head of Ontario's independent volunteer science table's modelling group, told my colleague Bruce Arthur before the weekend, summing up the feeling radiating south from Canada.

Down here in the U.S.? Well, there's no wartime footing. Media outlets are covering the emerging (scary) science of Omicron, but the hatches largely remain unbattered.

At a briefing by the White House COVID-19 response team on Wednesday, December 15, familiar faces (the Centers for Disease Control's Dr. Rochelle Walensky; the National Institutes of Health's Dr. Anthony Fauci) spoke of the emergence of the coronavirus strain that they said has a doubling time of two days and accounts for 13 per cent of cases in New York and New Jersey. The take-away message from the officials was the same as it's long been: get vaccinated, then get boosted. And please consider wearing a mask indoors.

During the daily press briefing on Air Force One on Wednesday, December 15, Omicron barely came up among the questions about the natural disaster in Kentucky, the budget wrangling on Capitol Hill, and the January 6 commission. When it was raised briefly, it was so the spokesperson conducting the briefing could essentially say no new restrictive shutdown or travel measures are imminent.

Asked directly how worried Americans should be, Dr. Fauci said, "If you are unvaccinated, you are very vulnerable not only to the existing Delta surge that we are experiencing, but also to Omicron." Those who are unvaccinated should get a shot, he said. Those who are vaccinated should get a booster, he said. Wear a mask in crowded indoor places, he said. "If you can't read the tea leaves accurately, then do the things that we've been recommending."

But see, he and his colleagues have recommended doing the things — the same things — for quite a while. And people have not been doing the things. Some of the things, they've been doing less and less.

Much of the country, for instance, is just about finished with masks. In the Washington, D.C. area, like in many big cities, people pretty much always still wear masks in stores, on public transit, and in official buildings. But I travelled with my family to rural Maryland over the weekend, and I can report that the scenes there were what you'd expect if the pandemic never began: in stores, bars, and restaurants, indoor pools, markets, and hotel lobbies, people were often crowded in and very few people were wearing (or even visibly carrying) a mask. I saw the same thing passing through various towns in rural Pennsylvania late last month.

Reports are that the same is true outside of major cities across the U.S.: "No one cares" about COVID-19, Matthew Walther wrote in the Atlantic on Monday. "Outside the world inhabited by the professional and managerial classes in a handful of major metropolitan areas, many, if not most, Americans are leading their lives as if COVID-19 is over, and they have been for a long while."

A large number of those people are not vaccinated. Vaccines are freely available here, at no cost and often with no appointment necessary, and have been for a long time. Booster shots for virtually every adult have been available for the asking for weeks (I got my booster in early November). But one year, almost to the day, after the first vaccine shot was administered in the U.S., according to the numbers Dr. Walensky shared during Wednesday, December 15's briefing, only about 60 per cent of Americans are considered fully vaccinated, and only about 16.6 per cent have gotten a booster shot.

Some Americans were never big on COVID-19 precautions. But it seems a lot of other people have recently decided, after all this time, that they too are done with them. That they're through with masking up and staying away from family and staying home for dinner. That they are ready to get on with their lives, for better or for worse.

And it may well be for worse. Much worse. Even before Omicron, the COVID-19 toll was being driven by Delta: just this week, the U.S. reached the staggering milestone of 800,000 deaths, and cases and hospitalizations from Delta have been climbing. The daily average of new cases in the U.S. for the seven days leading up to Wednesday, December 15 was more than 121,000, according to the New York Times (up 46 per cent in two weeks). Over 67,000 people were hospitalized each day on average, and every day more than 1,200 died.

And that is before the more contagious Omicron really takes hold, which it could do within a month or so, if not sooner.

President Joe Biden said when he announced his Omicron plan that it would involve "no lockdowns or shutdowns." He said "if people are vaccinated and wear their mask, there is no need for lockdowns." Plenty of Americans are not vaccinated, of course, and many more are no longer wearing masks. But the no-drastic-measures-pledge remains the White House line, even as the situation itself seems to get more drastic.

That approach seems in line with the attitude of much of the American public: the Omicron news is surely alarming, but they are too tired of being alarmed to get worked up.

U.S. CDC Handing Out Free COVID-19 Home Test Kits To International Travellers

By David Shepardson, Reuters, December 16, 2021

<https://globalnews.ca/news/8457182/cdc-travellers-free-COVID-19-test-kits/>

The U.S. Centers for Disease Control and Prevention (CDC) has started distributing free COVID-19 home test kits to international travellers, the agency said on Thursday, December 16.

The CDC said it began distributing the kits on Wednesday, December 15 and is giving them out at Minneapolis-St Paul, Miami, and Chicago O'Hare airports and will soon add Dallas-Fort Worth. It plans to add four additional unidentified international airports in the coming weeks.

The CDC encourages – but does not mandate – international air travelers to get a new COVID-19 test upon arriving in the United States.

New rules took effect on December 6 to require nearly all people flying to the United States to have obtained a negative COVID-19 test within one day prior to their flight.

Under the previous rules, vaccinated international air travelers could present a negative test result obtained within three days of their day of departure. Unvaccinated travelers had to get a negative COVID-19 test within one day of departure. The tighter testing timeline “provides an added degree of public health protection as scientists continue to assess the Omicron variant,” the White House said.

On November 29, the White House barred nearly all foreign nationals from entering the United States from eight southern African countries over fears of the spread of the Omicron variant. But it has not extended those travel restrictions to other countries where the new variant has been discovered.

Booster Blitz: UK Races To Get Ahead Of Surging Omicron

By Jill Lawless And Danica Kirka, The Associated Press, December 13, 2021

<https://abcnews.go.com/Health/wireStory/long-queues-form-uk-starts-booster-blitz-omicron-81718499>

Long lines formed on Monday, December 13 at vaccination centres across England as people heeded the government's call for all adults to get booster shots to protect themselves against the omicron variant, and as the U.K. recorded its first death of a patient infected with omicron.

In a televised announcement late on Sunday, December 12, Prime Minister Boris Johnson said everyone 18 and up would be offered a third vaccine dose by December 31 — less than three weeks away, and a month earlier than the previous target. Johnson said boosters would “reinforce our wall of vaccine protection” against an anticipated “tidal wave of omicron.”

U.K. health authorities say omicron cases are doubling every two to three days in Britain, and that the variant will replace delta as the dominant coronavirus strain within days. Health Secretary Sajid Javid told lawmakers on Monday, December 13 that omicron will be dominant in London “within 48 hours.”

While omicron is acknowledged to be much more transmissible than previous coronavirus variants, it's unclear both how virulent it is and whether the expected wave of infections will inundate the country's state-funded health care system

Barely two weeks after it was identified in South Africa, 10 people are in British hospitals with omicron-related COVID-19. The British government raised the country's coronavirus threat level on Sunday, December 12, warning that the rapid spread of omicron “adds an additional and rapidly increasing risk to the public and health care services.”

Scientists in South Africa say the variant may cause less severe disease than the delta variant but caution that it's too soon to be certain. Health authorities around the world are watching Britain closely to see what an omicron surge looks like in a country with an older, more highly vaccinated population than South Africa's.

“The idea that this is somehow a milder version of the virus, I think that's something we need to set on one side and just recognize the sheer pace at which it accelerates through the population,” Johnson said as he visited a vaccination centre in London. “So the best thing we can do is all get our boosters.”

The U.K. Health Security Agency says existing vaccines appear less effective in preventing symptomatic infections in people exposed to omicron, though that effectiveness appears to rise to between 70% and 75% after a third dose.

More than 80% of people age 12 and up in Britain have received two vaccine doses, and 40% of adults have had three. But the acceleration of the booster program will be a huge challenge, requiring almost 1 million doses given out each day — more than the previous high of around 850,000 a day. Some 750 soldiers and thousands of volunteer vaccinators will be drafted to give the shots at doctors' offices, hospitals, pharmacies, and pop-up vaccination centres.

Many routine procedures will be postponed as Britain's National Health Service swings into high gear for the boosters.

While the online booster appointment system will not be open to under-30s until Wednesday, December 15, adults could — and did — show up at a walk-in centres to get a booster starting on Monday, December 13.

At St. Thomas' Hospital, on the south bank of the River Thames in London, the lines of people waiting for booster shots stretched across Westminster Bridge toward Parliament. At the Gordon Hospital walk-in clinic in central London, most of those lining up were in their 20s and 30s.

Sam Collins, 30, said he was “not especially” worried about omicron, “but I'd just prefer to be triple vaxxed.”

“Also my partner has just had a baby and she’s not vaccinated, so if I can be extra vaccinated, then that will help,” he said.

The government’s appointment-booking website struggled to keep up with demand, and also ran out of rapid at-home virus test kits, which have been distributed free to households during the pandemic.

The British government’s December 31 booster target applies to England. The other parts of the U.K. — Scotland, Wales and Northern Ireland — are also expected to speed up their vaccination campaigns.

While omicron is spreading around the world, Britain may be especially affected because it ordinarily has high levels of travel to South Africa. The omicron outbreak is also more visible in Britain because U.K. is also a world leader in genomic sequencing, which identifies and tracks new variants.

Researchers in the U.K. have sequenced about 13.3% of all positive cases, compared with 3.8% in the U.S., according to GISAID, which promotes rapid sharing of data on COVID-19 and the flu. While Iceland and Denmark have sequenced a greater percentage of their positive cases, the size of the U.K.’s population and the scope of its outbreak mean that Britain has sequenced many more cases.

This surveillance provided key evidence that Johnson and his chief medical officers used in deciding to tighten pandemic restrictions and ramp up the U.K.’s vaccination program.

Johnson’s Conservative government is requiring vaccine certificates to enter nightclubs and re-introducing restrictions that were lifted almost six months ago. Masks must be worn again in most indoor settings and as of Monday, December 13, people were urged to work from home if possible.

Many scientists say those measures are unlikely to be enough and are calling for tougher ones. But cafes, pubs, and shops in city centres fear that plummeting numbers of commuters will hammer their businesses in the usually busy pre-Christmas period.

Johnson is facing a major rebellion from unhappy Conservative lawmakers when Parliament votes on the new virus restrictions. The measures are still highly likely to pass with support from the opposition Labour Party.

Robert Read, a professor of infectious diseases at the University of Southampton, said it was still unclear how severe cases of COVID-19 from omicron are but “omicron probably requires much larger amounts of antibody in the blood in order to thwart the virus as much as possible.”

“We need to get those third doses into as many adults as we possibly can, just in case this virus turns out to be a raging bull rather than a pussy cat,” Read told radio station LBC.

‘Every Pandemic Runs Its Course,’ Tam Assures Public In Face Of Omicron

By Laura Osman, *The Canadian Press*, December 13, 2021

<https://torontosun.com/news/national/canadas-public-health-needs-renewal-says-dr-theresa-tam>

COVID-19 is unlikely to be wiped out completely, but it might be tamed, Canada’s chief public health officer said on Monday, December 13.

Canada is expecting a potentially massive surge in cases in the coming weeks, driven by the new Omicron variant already spreading through communities, said Dr. Theresa Tam.

While COVID-19 might be with us for many years to come, Tam is optimistic the pandemic could end in the foreseeable future.

“Every pandemic runs its course,” she assured reporters at a press briefing on Monday, December 13.

“What we’re looking at is the transition from this urgent crisis response state to one where the virus is more predictable.”

Tam foresees a “bumpy ride” this winter, but Canadians can get through it with increased vaccination, proper testing, public health measures, and better treatments for the virus, she said.

“I think all of those point to what is still an optimistic outlook in the next year.”

In the meantime, Tam has urged the federal government to make fundamental changes so the country is better equipped to handle future and present health threats.

The COVID-19 pandemic was a wake-up call on the need for “public health renewal” in Canada, she said.

“Simply put, we were not prepared to face a public health emergency of the magnitude of COVID-19,” Tam said at a press briefing.

The call isn’t new, Tam acknowledged, noting her predecessors have been making the same pleas since 2008.

“Already stretched thin before the pandemic, the public health workforce is over-extended and may not have the capacity to counter the next emergency,” Tam wrote in her annual report, tabled on Monday, December 13 in the House of Commons.

“There are still unacceptable delays in getting the right data to inform public health decision-making. Society-wide inequities persist, and key social and economic policies started during COVID-19 may not be sustained. These vulnerabilities could weaken Canada’s resilience to future health threats.”

Tam fears the pandemic recovery will focus solely on the demands of the health-care system, which could overshadow the need to bolster public health.

Shoring up public health means improving Canada's data collection and surveillance, she wrote.

Tam says gaps in Canada's ability to collect data about the pandemic hindered the country's response.

"This fragmentation, alongside outdated technology, has especially pronounced consequences during health emergencies when access to data for real-time decision-making is paramount," she wrote.

Federal, provincial, and territorial governments are working on a country-wide data strategy, but the timelines are not fast enough, Tam said.

The government has tried and failed to improve data collection from health authorities in provinces and territories for decades.

In 2004, Canada attempted to roll out a health-data platform called Panorama, which included a consistent approach to tracking vaccinations in anticipation of future pandemics.

The expert advisory group in charge of steering Canada's latest health-data overhaul said Panorama failed after eight years and more than \$130 million in federal funds because of unclear accountability, and a lack of prioritization and trust between partners.

"All I can say is, we just got to give it a really good go yet again," Tam said.

Governments did make short-term gains during the pandemic, but data collection is still patchy, Tam added.

Her deputy, Dr. Howard Njoo, said improving data systems may be a matter of harnessing the political will garnered during the pandemic.

The public health workforce also needs bolstering, with sufficient surge capacity to rapidly expand the ranks in an emergency.

In addition, Tam warned the government against scaling back public health funding once the emergency has passed, as governments often do, which could leave Canada at a disadvantage at the onset of the next crisis.

"My ambition is to build a future where public health is viewed as essential to our daily lives," Tam said.

One estimate suggests public health spending accounts for just under six percent of total health expenditures in Canada, she said.

"It's not enough if you think about the fact that keeping our population healthy is as important as it is for treatment," she said.

Tam called for a clearer public health mandate, so that everyone knows what providers are being asked to deliver.

She hopes that will inform coming discussions between the provinces and territories about health-care transfers and the resources required.

The Canadian Public Health Association has gone even further, suggesting federal legislation to harmonize the roles and responsibilities for public health across the country.

“Such legislation would require a national funding accord that incorporates performance measures for the delivery of public health services according to national standards,” the Association’s executive director, Ian Culbert, wrote in a statement on Monday, December 13.

Pfizer Confirms COVID-19 Pill's Results, Potency Versus Omicron

By Matthew Perrone, The Associated Press, December 14, 2021

[Pfizer confirms COVID-19 pill's results, potency versus omicron \(msn.com\)](#)

Pfizer said on Tuesday, December 14 that its experimental pill to treat COVID-19 appears effective against the omicron variant.

The company also said full results of its 2,250-person study confirmed the pill's promising early results against the virus: the drug reduced combined hospitalizations and deaths by about 89% among high-risk adults when taken shortly after initial COVID-19 symptoms.

Separate laboratory testing shows the drug retains its potency against the omicron variant, the company announced, as many experts had predicted. Pfizer tested the antiviral drug against a man-made version of a key protein that omicron uses to reproduce itself.

The updates come as COVID-19 cases, deaths, and hospitalization are all rising again and the U.S. hovers around 800,000 pandemic deaths. The latest surge, driven by the delta variant, is accelerating due to colder weather and more indoor gatherings, even as health officials brace for the impact of the emerging omicron mutant.

The Food and Drug Administration is expected to soon rule on whether to authorize Pfizer’s pill and a competing pill from Merck, which was submitted to regulators several weeks earlier. If granted, the pills would be the first COVID-19 treatments that Americans could pick up at a pharmacy and take at home.

Pfizer’s data could help reassure regulators of its drug's benefit after Merck disclosed smaller-than-expected benefits for its drug in final testing. Late last month, Merck said that its pill reduced hospitalizations and deaths by 30% in high-risk adults.

Both companies initially studied their drugs in unvaccinated adults who face the gravest risks from COVID-19, due to older age or health problems, such as asthma or obesity.

Pfizer is also studying its pill in lower-risk adults — including a subset who are vaccinated — but reported mixed data for that group on Tuesday, December 14.

In interim results, Pfizer said its drug failed to meet its main study goal: sustained relief from COVID-19 for four days during or after treatment, as reported by patients. But the drug did achieve a second goal by reducing hospitalizations by about 70% among that group, which included otherwise healthy unvaccinated adults and vaccinated adults with one or more health issues. Less than 1% of patients who got the drug were hospitalized, compared with 2.4% of patients who got a placebo pill.

An independent board of medical experts reviewed the data and recommended Pfizer continue the study to get the full results before proceeding further with regulators.

Across both of Pfizer's studies, adults taking the company's drug had a 10-fold decrease in virus levels compared with those on placebo.

The prospect of new pills to fight COVID-19 can't come soon enough for communities in the Northeast and Midwest, where many hospitals are once again being overloaded by incoming virus cases.

Both the Merck and Pfizer pills are expected to perform well against omicron because they don't target the coronavirus' spike protein, which contains most of the new variant's mutations.

Centers for Disease Control and Prevention Director Rochelle Walensky, appearing on NBC's "Today" on Tuesday, December 14 said the best way for people to protect themselves against COVID-19 is to get vaccinated and get a booster shot. She said the Pfizer pill, if authorized by the FDA, "will be another great tool, but we need to diagnose people early."

The U.S. government has agreed to purchase enough of Pfizer's drug to treat 10 million people and enough of Merck's to treat 3 million, pending FDA authorization.

Health Experts Critical Of Canadian Truckers' Vaccination Exemption Plea

By Tara Deschamps, The Canadian Press, December 13, 2021

[Health experts critical of Canadian truckers' vaccination exemption plea \(msn.com\)](https://www.msn.com/en-ca/news/health/health-experts-critical-of-canadian-truckers-vaccination-exemption-plea)

Canada's trucking industry wants the federal government and the U.S. to exempt their workers from forthcoming vaccination mandates, but health experts say the proposal is problematic.

The Canadian Trucking Alliance is arguing that if the government sticks to its current plan requiring all truckers crossing into Canada to be fully-vaccinated against COVID-19 by January 15, the country's supply chain issues and worker shortages will worsen.

The CTA wants the government to uphold the exemption it granted truckers when vaccines became available earlier this year, until the country resolves its supply chain issues.

However, health experts say that exemption would be unfair because other industries are facing worker shortages too and not being granted an exemption.

They say making allowances for a highly mobile group such as unvaccinated truckers could be dangerous because the virus could spread even further, and that these workers have had enough time to get their shots.

"Everybody admires the hard working truck driver and that all through the pandemic they have been barrelling through with their loads of food for the supermarkets... but the vaccines are available and they've been available for the best part of a year now," said Timothy Sly, an epidemiologist and professor emeritus at Ryerson University's School of Occupational and Public Health.

"With the increasing variant coming along, there is no excuse at all now for not being vaccinated."

Sly believes the truckers shouldn't get an exemption because they're making deliveries all over North America, often interacting with people at pick-ups and drop-offs and can easily bring the virus along with them to uninfected places.

The new Omicron variant makes vaccination even more pressing, he said.

"The variant is out there and is hunting for the unvaccinated," he said.

"If you want to reduce your population of truck drivers even more, then hold off on the vaccination and you're going to see an awful lot of them become ill with COVID-19."

While there are many companies with 90 per cent or more of their truckers vaccinated, CTA President Stephen Laskowski said there are also businesses with far fewer vaccinated drivers.

He's heard of companies with vaccination rates as low as 40 or 50 per cent and said businesses are trying to convince workers to get the shots through education and even monetary incentives.

Fuel Transport, for example, will give workers who get vaccinated a \$10,000 bonus, it announced last week.

If no exemption is granted for truckers, Laskowski predicts that many will be forced out of work and finding replacements will be next to impossible because the industry has long struggled to attract employees willing to work long hours on the road.

Roughly 332,000 truck drivers worked Canada's highways in October, roughly in line with pre-pandemic levels. There were 18,000 vacancies in recent months as young drivers, women, and retirement-age workers left, according to Trucking HR Canada. Some 55,000 job vacancies are projected for 2023.

"We have a significant driver shortage already," Laskowski said.

"To say, if these individuals choose not to be vaccinated and leave the sector, we can go out and replace them, the reality is we can't."

Also at stake are supply chains that are already hampered by material shortages, extreme weather in B.C. and abroad, and COVID-19 outbreaks.

"There are many reasons why the supply chain is suffering the way it is," said Laskowski.

"Truck drivers is one of the major pieces of the puzzle... and that piece of the puzzle as a problem is only going to get bigger with these mandates."

But giving exemptions and tweaking rules for some can make understanding already complicated COVID-19 policies even more difficult, said Sara Allin, an associate professor at the University of Toronto's Dalla Lana School of Public Health.

People are already confused by rules requiring vaccination to enter some establishments and not others and by regulations that have forced some workers to get vaccinated but left others free to forgo COVID-19 inoculations.

"Having all these carve outs and different rules is confusing," she said.

"I think we need some really clear messaging and standards on vaccines."

Flair Airlines Will Make Waterloo Region 'Part Of Our Growth' In Doubling Its Jets

By Jeff Outhit, Waterloo Region Record, December 15, 2021

https://www.therecord.com/news/waterloo-region/2021/12/15/flair-airlines-will-make-waterloo-region-part-of-our-growth-in-doubling-its-jets.html?source=newsletter&utm_content=a02&utm_source=ml_nl&utm_medium=email&utm_email=6D73923380F292A40DC042B455F0FDE3&utm_campaign=wrha_113806

The upstart airline that's bringing new passengers and jobs to the Region of Waterloo International Airport plans to double its jets to fly more often to more places by 2023.

This expansion may lead to more service out of the Breslau airport, although Flair Airlines has yet to specify local impacts.

"It's fairly safe to say that Kitchener-Waterloo will definitely form a part of our growth going forward," chief commercial officer Garth Lund said as Flair announced its expansion.

Flair's expansion comes after regional government committed \$44 million to expand the airport to handle 782,000 passengers next year and beyond.

"The good news for Kitchener-Waterloo is that it continues to perform very well for us. We think it's one of our strongest performers," Flair president Stephen Jones said.

The Edmonton-based discount airline announced on Wednesday, December 15 that it will expand to 30 Boeing 737 jetliners by 2023. That's up from 12 jets it operates today and up from 20 jets it will operate by next summer.

Flair keeps two of its jetliners at the local airport and employs more than 100 people here.

The regional airport, which has historically struggled to retain carriers, expects to see a record 204,000 passengers in 2021 after Flair began operating here earlier this year.

A federal agency that regulates airlines is looking into financial concerns that Flair is too controlled by its U.S. investors. By law, Canadian airlines must be mostly owned by Canadians.

"I'm very comfortable that Flair Airlines is fully compliant," Jones said, citing 58-per-cent Canadian ownership.

City Of Toronto Delays Return To Office After Province Issues New Public Health Advice

By Ryan Rocca, Global News, December 13, 2021

<https://globalnews.ca/news/8447547/city-of-toronto-return-to-office-delay/>

City of Toronto office staff will continue to work remotely come January.

In a news release issued on Monday, December 13, the City said it is delaying its return to office plans, which affects around 25 per cent of the City's workforce.

The statement said the decision was made after Ontario's chief medical officer of health Dr. Kieran Moore released new public health advice on Friday, December 10 advising employers to allow staff to work from home when possible.

Less than two weeks ago, Toronto Mayor John Tory announced that fully vaccinated staff would be returning to the office on January 4.

Now, workers won't return to the office until public health advice changes, Monday, December 13's statement said.

Counter services at city hall and at civic centres will remain open.

Rising COVID-19 cases and the spread of the Omicron variant prompted the province to announce new measures on Friday, December 10, including expanded booster dose eligibility, changes to the proof of vaccination system, and an "enhanced winter testing strategy."

COVID-19 Variant Omicron Delays Return-To-Work Plans For Canadian Companies

By James Bradshaw, Chris Hannay, Clare O'Hara, and Irene Galea, The Globe and Mail, December 14, 2021

Concerns about the rapid spread of the Omicron variant are throwing a wrench into company plans for a broader return to the office in January and putting added pressure on local businesses that had benefited from higher foot traffic in commercial districts. On Tuesday, December 14, Sun Life Financial Inc. said it was pausing a pilot return-to-office project until the end of January and would not add more employees to the program, which was launched last summer, citing concerns about Omicron. The company was also considering additional safety measures in its office, even though the vast majority of its staff are still working remotely. A day earlier, Bank of Nova Scotia said a previously announced plan to start most employees on a phased return to the office on January 17 had been put on hold. Spokesperson Clancy Zeifman said the bank was “pausing its plans” in response to the latest guidance from the Ontario government “and will reassess timing in the new year.” In Toronto’s financial district, “foot traffic was absolutely picking up,” said Lara Zink, the chief executive officer of Women in Capital Markets. “I think all of that is on hold.” As COVID-19 case numbers tick higher, bank employees are likely going to be told to stay home, she said. For small businesses such as restaurants, cafés and barbers in downtown cores, a return to the office also meant the return of customers. A delay means those businesses have to hold on longer with diminished foot traffic. Many employers have been refining hybrid work arrangements and experimenting with rotating staff through the office to adhere to physical distancing guidelines. But with the new variant creating renewed uncertainty about re-opening plans, “many businesses have now delayed their return-to-work strategies,” Rocco Rossi, the CEO of the Ontario Chamber of Commerce, said in an e-mail. Manulife Financial Corp., the country’s largest insurer, announced last month that it plans to re-open buildings on January 24, implementing hybrid work arrangements that will require staff to come in three days a week. A company spokesperson declined to comment on the status of that plan on Tuesday, December 14. Other large banks and insurers, which have critical staff working on site but a majority of employees working remotely, have repeatedly pushed back timelines for a broader return to the office and more recently avoided setting firm target dates. On Tuesday, December 14, spokespeople for several large financial institutions declined to provide updates on their expected timelines. Even workers in jobs that were at the vanguard of the march back to offices could be compelled to retreat. At banks, many traders have spent months working rotating schedules that keep trading floors busy but below full capacity. But even they may be forced back to home offices set up in the early months of the pandemic. “I suspect the trading floors will go into temporary shutdown until the data confirms what we’re dealing with,” Ms. Zink said. “I wouldn’t be surprised if everyone was told to stay home until the end of January, until the whole effect of the holiday passes us.”

Read Story (Subscription Required): <https://www.theglobeandmail.com/business/article-COVID-19-variant-omicron-delaying-return-to-work-plans-for-canadian/>

OTHER CAFII MEMBER-RELEVANT NEWS/ISSUES

U.S Life Insurance Claims Rise At Quickest Pace Since 1918 Pandemic

By Leo Almazora, HomeNews, December 12, 2021

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As the coronavirus pandemic spurred a torrent of interest in life insurance among consumers, insurers in the U.S. also saw their death benefit payouts rise at a record rate.

According to figures from the American Council of Life Insurers (ACLI), death benefit payments rose 15.4% to US\$90.43 billion in 2020, reported the Wall Street Journal. That's the most the figure has increased since 1918, when the 1918 influenza epidemic sparked a 41% surge in payments.

Before the pandemic, American insurers have typically seen modest increases in payouts, which led up to the US\$78.36 billion in death claims for 2019.

The latest surge is likely to cause some second thoughts among publicly traded U.S. life insurers. Last summer, some of those companies pared back estimates of their exposure, measured by payouts per 100,000 U.S. COVID-19 fatalities, as the deaths were heavily weighted toward older Americans who tend to have smaller policies than their younger adult counterparts.

That changed somewhat with the arrival of the Delta variant. According to figures from the U.S. Centers for Disease Control, approximately 80% of COVID-19-related deaths in 2020 were among adults 65 and older; this year, that cohort has accounted for 69% of COVID-19-related fatalities, and 25% were among those between 45 and 64 years old.

People in the workforce are more likely to have larger coverage than seniors and retirees. Workers tend to get life insurance coverage as an employee benefit, aside from which they can also take on individual policies to help protect their families financially should the worst happen.

The 1918 flu pandemic brought the number of U.S. deaths to roughly 675,000, according to the CDC. During that period, mortality was high among people younger than 5 years old, adults from 20 to 40 years old, and seniors who were at least 65 years old.

Insurance policy sales in the U.S. have also risen by the fastest in a quarter-century, according to industry-funded research firm LIMRA. Across the industry, total new life insurance premiums rose 18% for the first three quarters of 2021, the fastest pace for a nine-month period in 25 years.

The increased awareness and purchasing behaviour among consumers, combined with the returns on some investments by insurers, brought life insurance industry assets up 7.7% to US\$8.2 trillion last year, according to the ACLI.

RESEARCH/THOUGHT LEADERSHIP/TECHNOLOGY/DIGITIZATION NEWS

2021's Wild Price Increases Will Soon Give Way To 2022's Year Of Discounts, According To The Economist Who's Studied The American Shopper For Decades

By Ben Winck, Business Insider, December 11, 2021

[2021's wild price increases will soon give way to 2022's year of discounts, according to the economist who's studied the American shopper for decades \(msn.com\)](#)

Inflation is the worst it's been since the early 1980s. But an award-winning expert on consumer behavior thinks it won't stay that way for long, as supply roars back, demand evaporates, and the shipping crisis is patched up.

Prices climbed 6.8% in the year through November, according to Consumer Price Index data published on Friday, December 10. That's the highest year-over-year inflation since 1982 and caps a months-long streak of historically strong price growth. With several pockets of the economy reaching a full recovery, inflation has emerged as the biggest thorn in the country's side.

Much of the latest inflation surge is linked to the supply-chain crisis ensnaring the global economy. Material shortages, port logjams, and order backlogs have kept businesses from matching strained supply with shoppers' extraordinary demand. The phenomenon has turned the holiday season into an inflationary nightmare.

But the worst of the mess is already behind the country, Susan Sterne, president and chief economist at Economic Analysis Associates, told Business Insider on Friday, December 10. With decades of work on the behavior of the American consumer to boast of, Sterne's expertise helped her accurately forecast much of the pandemic's fallout and the following recovery. By using a consumer-centric approach over one that prioritizes top-down data, Sterne has decoded the COVID-19 economy better than many peers for years.

Her latest take: the cavernous gap between supply and demand is already closing.

The Thanksgiving and Black Friday shopping weekend "was weaker than expected, so you'll start to see some aggressive discounting," she said.

Both sides of the supply and demand conundrum powering higher prices should ease in the months ahead.

The first part of the equation has to do with rebounding supply. New orders at manufacturers slowed in November while inventories climbed higher, according to leading industry surveys, with some firms stockpiling goods to counter the supply-chain crisis. The share of manufacturers with higher inventories is the largest it's been since 2010, signaling supply is finally picking up, Sterne said.

At the same time, Americans' demand is on the decline. Sentiment readings from the last few months show Americans' recovery hopes cratering amid high inflation. Consumers can either decide to buy more now before prices rise further, or elect to slow their spending since prices have gotten too high, Sterne said. The latest indicators suggest the latter is coming true.

"They've had phenomenal consumption for two years, so it's not that we're coming from a period of very low spending ... we're beyond this great boom time that we've been through," Sterne said. "This is the first time in three years we haven't had consumers with all this extra money in their pockets and small businesses with their PPP loans."

How The US Goes From Shortages To Surpluses

Plenty of data is showing that we're seeing the supply chain recover. Shipping costs, long-sitting containers, and import arrivals all show logjams easing through November. Third-quarter earnings reports also signal the supply crisis has already peaked, Jefferies economists said in a Friday, December 10 note.

Cooling energy prices suggest the recovery will be even faster in the months ahead. Elevated energy costs have played a major role in driving transportation prices higher and tangling the global supply chain, Sterne said. Crude oil prices have fallen significantly since hitting seven-year highs in November. That should help companies shore up supply faster, Sterne added.

The shift from a supply shortage to a demand shortage could be so strong that Americans face discounts in 2022 instead of empty shelves. The fourth quarter is the busiest time of the year for consumer spending, but the following months usually see demand quickly fade, Sterne said, adding a sharper slowdown would pave the way for discounts to return.

"[Demand] just disappears into mid-January and February until we get to spring," she said. "It's a period of very, very slow demand, which makes people nervous, particularly if inventories are still on the road and arriving in their warehouse. That's what we should watch for."

The US' transition to cooler inflation and healthier supply was never "a question of if, but a matter of when," Sterne added. As far as Sterne is concerned, that "when" is already here.

Manufacturers Consider Changes To Just-In-Time Production Model Amid Disruptions

By Christopher Reynolds, The Canadian Press, December 12, 2021

<https://www.thefreepress.ca/news/manufacturers-consider-changes-to-just-in-time-production-model-amid-disruptions/>

For much of the past 21 months, Rami Aroosi has struggled to procure enough bikes to fill the racks of his downtown Ottawa cycle shop.

Shipping rates have skyrocketed amid a backed-up global supply chain caused by the COVID-19 pandemic, pushing up prices. And the absence of just one part in a vast manufacturing network that originates in Asia can put the brakes on entire shipments.

“For example, Shimano — almost every second bike on the planet has Shimano parts,” says Aroosi, who has run Foster’s Sports Centre for three decades. “The companies manage to get the frames, but they cannot get the parts to assemble it.

“It’s like a chain: One thing triggers another and makes it really worse.”

Aroosi is among thousands of retailers across the country whose sparsely filled stockrooms have run short of products ranging from electronics to lumber and liquor.

The shortages and price hikes highlight the vulnerabilities of a just-in-time delivery model, prompting stakeholders and experts to rethink the fine-tuned approach with an eye to early warning systems, reshoring and infrastructure upgrades.

Originating in the automotive industry in the 1950s and honed across a globalizing supply chain, just-in-time manufacturing aims to precisely calibrate assembly lines and shipments while minimizing stockpiles that weigh on efficiency. Rather than spending time and money to warehouse parts, producers receive goods as needed.

“Fifty years ago you would buy six months’ worth of material and run it out. Now you call your supplier saying you need it for Tuesday and it shows up on Monday night ... We went from just in case to just in time,” said Dennis Darby, CEO of the Canadian Manufacturers and Exporters trade group.

“It’s a very efficient supply chain, but it’s really not very resilient.”

Darby explains that the system works well under optimal conditions, but is vulnerable to unforeseen events. “What happens when you have a perturbation in the supply chain, whether it’s the impact of the pandemic in some countries or a disruption — everything from a container ship in the Suez Canal to China shutting down ports?”

Manufacturing amounts to more than 10 per cent of Canada's gross domestic product and \$354 billion in annual exports — 68 per cent of all exported merchandise — according to the federal Industry Department. That means a wrench in the gears has major repercussions.

The pandemic-driven shortage of semiconductor chips has hurt vehicle producers particularly hard, along with makers of items from smartphones to fridges.

Canada's auto industry felt the pinch more than most, as producers tended to funnel what semiconductors they had to their bigger, pricier models rather than compact ones such as the Honda Civic or Chevy Equinox, Darby said. "And Canada tends to produce more economical models."

On top of driving up the price for consumers, the dearth of semiconductors will likely cost the global auto sector US\$210 billion in revenue, according to consulting firm AlixPartners. Some 7.7 million vehicles will not be made in 2021, it forecasted in September.

The situation has pushed manufacturers to consider baking in early warning systems for shortages along with more transparency and communication between players, said Brian Kingston, who heads the Canadian Vehicle Manufacturers' Association.

"Instead of relying on a third-tier supplier who has a relationship with the semiconductor company, there'd be a closer relationship between the OEM (original equipment manufacturer) and the producer," he said.

Kingston doubts that a fundamental shift to an intricate production system woven over decades and continents is on the brink of rapid unravelling.

But reshoring is already in motion. U.S. President Joe Biden's \$US2-trillion infrastructure plan includes US\$300 billion to bolster the American manufacturing sector, setting aside US\$50 billion for semiconductor production and research.

Ottawa's strategic investment fund, including \$5 billion over seven years for the "net zero accelerator" laid out in the April budget, aims to boost research and development across sectors, such as the green economy and the fledgling biomanufacturing field.

Analysts also project that demand for rare-earth metals will soar as auto giants will need batteries to electrify their fleets.

"The biggest opportunity for Canada hands down is in critical minerals and rare earths," Kingston said, citing the country's "very significant endowment" of cobalt, graphite, lithium, and other elements and metals.

But the field is already dominated by China, which accounted for 81 per cent of global rare earth production in 2017, according to the U.S. Geological Survey.

"We do have to move quickly, because it's a very fast-evolving space and hugely competitive," Kingston said.

Reshoring production could be appealing — particularly for industries such as vehicle manufacturing that rely on automation — if plants can be built on cheap land at home, said Anming Zhang, a business professor specializing in transport at the University of British Columbia.

“Asia has a dense population, so land is really not as abundant as what we have in North America. If this automation movement continues then ... reshoring may be reasonable and quite natural,” he said.

Scale and flexibility offer other paths around gummed-up supply chains.

Canada’s Semiconductor Council issued a report last month recommending the country form a government-led consortium of chip buyers by 2025 to bolster negotiating power.

Online platforms such as Flexe, which allow companies to share warehouse space and distribution capacity, present a cheaper route to backup inventory, said Maria Jesus Saenz of the Massachusetts Institute of Technology’s Center for Transportation and Logistics.

Meanwhile, recent flooding and landslides that cut vital road and rail links in southern British Columbia further exposed Canada’s supply-chain vulnerability and the need for stronger infrastructure, she said.

Dredged harbours, twinned rail lines and fresh retaining walls offer a limited solution. But new supply channels are tough to carve out, given the limited number of large North American ports — with still fewer alternatives if severe weather or labour issues snarl service to those sea hubs, as happened this fall in Vancouver and Los Angeles, respectively.

“Why have we organized these systems — just-in-time or lean engineering and all that kind of stuff — when the system has proved to be unreliable to a great degree?” asked Brian Slack, a geography professor emeritus with a focus on maritime transport.

“There’s going to be changes” — the only question is how fundamental and far-reaching.

How To Work With Insurtechs To Maximize Value, Limit Risk

By Rick Bushell, Chief Technology Officer, Honk, December 8, 2021

https://www.dig-in.com/opinion/how-to-work-with-insurtechs-to-maximize-value-limit-risk?position=editorial_2&campaignname=DIG%20Weekend%20update-12112021&utm_source=newsletter&utm_medium=email&utm_campaign=V2_DIG_Weekend_Update_20210410%2B%E2%80%98-%E2%80%992B12%2F11%2F2021&bt_ee=GK4vdNMhzu4Je9XMj30xtiukn87W2TXfsYkjMOySaQBVUhg4x1Hjom5HfrXBRI7B&bt_ts=1639231433039

Every day, it seems a hot, new insurtech is funded and ready to partner with insurance carriers. Insurers shouldn’t allow their risk-averse nature or concerns about a potentially difficult integration road ahead to lead them to ignore upstart insurtechs.

The best among the insurtechs are providing new technologies that will rapidly give their partners significant competitive advantages in this era of rapid claims technology advancement.

That said, there's no denying that working with startups entails risk. Plenty of newer insurtechs have technology that's too underdeveloped, a value proposition that's too undefined, or leadership that's too inexperienced to overcome the gauntlet of obstacles that stands between startups and success. What if the startup folds unexpectedly? Will they protect your sensitive data adequately? Will they deliver on their promises or cause your company to lose trust in adopting new technologies in the future because of a perception that they never produce the results they initially promised?

Insurers can and do work with young insurtechs very successfully. But they cannot interact with them like established companies. The long-held norms for working with a vendor don't apply. While many "hot" startups come to the table with eye-popping advancements that promise to provide almost unbelievable gains in cycle time, cost savings, and customer experience, not all will deliver on these promises on day one. Some will even intend to build their product as they go, and a few of these will even succeed. While this is far outside the comfort level for how most established companies operate, it's also how the most successful technology companies, including Apple, Amazon, and Google got their start.

The advantages of working with startups can be compelling. With strong startups, their small size and scrappy culture make these teams extremely nimble, enabling them to turn on a dime and make almost instant changes to their product as if they're building it just for you. As an experienced technology executive with both startup and insurer partnership expertise, I've forged the most successful partnerships when insurers seek a very transparent, hands-on relationship. In these cases, organizations are in near-constant communication at a product and engineering level from early testing to a full launch. Most of the vetting early on is focused on making sure teams on both sides can work together successfully with the right mix of talent, resources, and culture to bring to life a product that delivers results.

Unlike established vendors, startups will continue to develop and refine their solutions while the teams are working toward a pilot. After all, they're breaking new ground, working with cutting-edge technologies and novel use cases. Unless an insurtech is in a late stage of its lifecycle, it's very unlikely that they'll approach you with a fully polished solution that's ready to deploy. It's a sign of a strong startup partnership when the carrier is investing much more time in product discovery mode than it would with established vendors. This up-front investment is critical to startup success. Once startups have a thorough understanding of the problem set and the personas who will interact with the solution, both parties can hit the ground running with a piece of technology that's tailored to your needs and delivers value the day you launch it.

Common Mistakes

The first big mistake that insurers make is to underestimate the speed at which tech companies work. There's often a mismatch in velocity. Tell a startup that you'd like to see a certain capability in their solution, and they might very well reply, "Sure! We'll get that done this week!" Insurers often cannot move that fast, so it's important to set expectations on both sides about priorities, deliverables, and timelines at the outset.

Second, especially during early discussions with the startup, an insurer should make sure that it has a product person or, at the very least, someone who is technically literate be involved to work as a liaison between the two companies. All too often, insurers send a line of business managers to talk with an insurtech. Without a comprehensive and intricate understanding of how the tech works, an insurer may sign on to a project prematurely, creating a problem for their engineering team down the road. Eliminate the back and forth of, “Well, that’s what I heard, but let me go back to the insurtech to make sure.”

The tech people should be talking directly to each other from the very beginning.

Startups will often bite off far more than they can chew because they’re ambitious and confident, but insurers oftentimes don’t share the same appetite for risk. To deal with this mismatch, an insurer should begin with a small manageable project that can be completed in a relatively short period, and manage the project closely. Startups are always trying to keep multiple balls in the air, and they often wait until the very last minute to deliver. Starting small limits your risk and gives you a firsthand look at how well your teams work together and enables you to determine whether the results live up to their initial promises.

Security And Technology Evaluation

When first meeting with a startup, there are some questions an insurer should ask upfront before committing:

- What’s innovative about this?: An insurtech should be able to crisply explain the advantages of their solution versus what’s already on the market. If they can’t, then there’s really no reason to accept the risk of working with a startup – especially if what they offer is largely already available from established vendors.
- What does deployment look like? What does it entail and how long will it take?: Modern software is almost always delivered as a service, and installation should be pretty quick. A six-month deployment timeline is very “old school” and usually a big red flag. If extensive on-premises deployment is required, there should be a very good reason.
- How does your solution integrate with other technologies?: Are they using an existing API or are they in the process of building one? Get a clear understanding from the very beginning of what integration will entail and what stage they’re currently at with respect to integration.

Also, don’t neglect to put an insurtech’s solution through a security audit, but be aware that they probably won’t be able to tick off every one of your boxes. If you have concerns, voice them. Startups are often willing to work closely with you to resolve any outstanding security issues.

As for data, an insurer should only give a new potential partner the bare minimum needed to accomplish the current goals, especially when dealing with personally identifiable information. For instance, if an insurtech needs customer names, do they need the full name? Would only the first name be sufficient? Taking a conservative approach can reduce your exposure and risk.

The Importance Of Transparency

Remember, when working with a startup, especially one that's very early in its life, you will be co-developing a solution alongside the new vendor. Transparency is vital. An insurer should be very clear about what it wants to achieve, should keep the initial scope small, and should structure the project incrementally. Have the vendor deliver the hard stuff first. Even the most successful startups promise the moon without really knowing for sure whether they can deliver. This ambition may drive them to succeed, but it's risky. Take an agile approach. A new partner should deliver something of value regularly. Keep the focus on value.

Insurtechs are remaking the way that insurers conduct their business, bringing new technologies to solve age-old problems, and providing efficient, powerful solutions. But these nimble and audacious insurtech startups can't be managed in the same way as an established, global vendor. By starting small, working closely and transparently with them, and keeping goals achievable, you can limit risk while maximizing the potential upside for innovation.

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Dates: January 27, February 10 & 24, March 10 & 31, 2022

Time: 9:00 a.m. – 5:00 p.m. EST

This event for financial services features live access to interact with and learn from regulators, industry leaders and peers. Get crucial updates, insights and strategic guidance for navigating key legal and operational risks impacting compliance professionals. Key areas of focus include:

- Critical updates for financial institutions and views into regulators' pipelines of priorities, current and anticipated
- Top tips on managing data, privacy and technology
- Practical guidance to navigate the 'fair treatment of customers' and escalating demands for ethics and integrity
- Strategies to manage changes to regulatory frameworks and supervision

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