



Canadian
Cancer
Society

**Submission to the Standing Senate Committee on Social Affairs, Science and
Technology**

Government's Response to the COVID-19 Pandemic

Submitted by the Canadian Cancer Society



Introduction

This is an unprecedented time in our history – the COVID-19 health crisis is far-reaching and is having an undeniable impact on people across Canada and around the world.

More than 1 million Canadians are living with and beyond cancer. Those with cancer are among the most vulnerable in our communities right now and may be at greater risk of more serious outcomes from COVID-19. Unfortunately, cancer does not stop being a life-changing and life-threatening disease in the middle of a global health crisis. The Canadian Cancer Society's (CCS) highest priority is to support people with cancer and their caregivers.

CCS is pleased to make this submission to the Standing Senate Committee on Social Affairs, Science and Technology to highlight the needs of people with cancer and their caregivers. While the impacts of COVID-19 will be felt for months and years to come, so too will the needs of people with cancer and their caregivers change as the impacts of the pandemic evolve. This submission captures one point in time, it is not clear what the long-term health implications will be for people with cancer.

Summary of Recommendations

1. CCS recommends that the Government of Canada implement specific economic measures for charities.
2. CCS recommends that the Government's commitment to data monitoring and research includes a focus on the long-term impact of public health measures and health system response on people living with cancer.
3. CCS recommends that the Government continue to focus on the Minister of Health's mandate letter commitment to make home care and palliative care more available across the country.
4. CCS recommends that the government extend the Employment Insurance Sickness Benefit to at least 26 weeks and follow through on Minister Qualtrough's mandate letter commitment.

Impacts to the charitable sector and CCS response to COVID-19

CCS recommends that the Government of Canada implement specific economic measures for charities. We need to ensure that both cancer patients and cancer researchers are not forgotten. Canada needs to protect and expand our charitable infrastructure and services even in the face of financial challenge. This is important for individual Canadians, our governments, businesses and other charities.

The COVID-19 pandemic is threatening to quickly destroy Canada's charitable sector. Canada's charities are a vital part of the Canadian economy, contributing more than eight percent of Canada's GDP (\$162 billion in 2017) and employing more than ten percent (1.4 million) of working Canadians. Charities rely on a steady stream of donations, business support and government investments to survive. All of these revenue sources have been disrupted and are under threat. To maintain the trust of donors, charities do not carry large financial savings, investments, or credit sources. They have very few tools to overcome the impact of this crisis.

There are 170,000 charitable and non-profit organizations in Canada. 85,000 are registered charities (recognized by the Canadian Revenue Agency). Without the presence of charities supporting Canada and the world's recovery, more and more vulnerable members of our society and world will be at risk, which in turn will worsen and deepen the impact of COVID-19 for all Canadians. The reality is, while the need for CCS's programs has never been greater, our ability to fundraise for these services has diminished.

CCS raises almost \$180 million per year in total revenue. While the impact on donations will be considerable, we know that the impact of the virus goes well beyond donations for CCS. Overall, we estimate that the COVID-19 crisis will result in a decline in donations for CCS of between \$80 to 100M over the next 12 months nationwide, a loss of 44% to 55% from our annual budget. Efforts like the Canada Emergency Wage Subsidy offer some relief; however, it falls short of what is needed to keep our organization and the services we offer viable. The Canadian Cancer Society is effectively excluded from the Canada Emergency Support Fund and is ineligible for the Canada Emergency Commercial Rent Assistance program.

CCS is supportive of the proposed measures for charities by Imagine Canada, the Health Charities Coalition and the Emergency Coalition of Canadian Charities.

CCS is dedicated to supporting people with cancer and their caregivers during this global health crisis. The impact of COVID-19 has led to a quickly changing environment for the more than one million people in the country who are living with and beyond cancer. People with cancer are at greater risk of more serious outcomes if they contract COVID-19. We are seeing a rapidly growing need for mental health support and for practical assistance as the impact of COVID-19 has changed the way people cope and receive care.

Media stories from around the world are demonstrating the devastating impact of COVID-19 on cancer patients:

- Patients with certain cancers are nearly three times as likely to die of COVID-19;¹
- Coronavirus crisis could lead to 18,000 more cancer deaths, experts warn.²

As the voice for Canadians who care about cancer, we are doing all we can to provide information, programs and supports to people coping with disruptions in their treatment or that of a loved one. Now more than ever, CCS's online and telephone support programs are critical to help people facing cancer and their caregivers to reduce anxiety and manage feelings of isolation.

Since the outbreak began, there has been significant demand for CCS's live chat services, toll-free helpline and online peer support community, cancerconnection.ca, which is moderated by CCS staff to ensure no question goes unanswered. These programs help people find community and connection from the comfort and safety of their own home.

¹ McGinley, C. (April 28, 2020). *Patients with certain cancers are nearly three times as likely to die of COVID-19, study says*. The Washington Post. Retrieved

from: <https://www.washingtonpost.com/health/2020/04/28/coronavirus-cancer-deathrates/>

² Campbell, D. & Bannock, C. (April 29, 2020). *Coronavirus crisis could lead to 18,000 more cancer deaths, experts warn*. The Guardian. Retrieved from: <https://www.theguardian.com/society/2020/apr/29/extra-18000-cancer-patients-in-england-could-die-in-next-year-study>

Consistently, almost 50% of clients receiving our services are seniors. Almost 60% of all new cancer diagnoses and 75% of all cancer deaths occur in seniors.

CCS's unique national infrastructure can be augmented and leveraged to respond to these concerns and to provide practical assistance on the ground to help reduce the strain on some of the most vulnerable Canadians through the pandemic and after, as the healthcare system recovers. The reality is, while the need for our programs has never been greater, our ability to fundraise for these services has diminished. If additional actions are not taken soon, all of our programs and services helping people cope through the COVID-19 crisis are at risk.

CCS currently has a financial proposal in front of the current Ministers of Finance and Health to ensure that CCS is able to provide a continuation of patient services to the 1 million Canadians living with and beyond cancer. We strongly encourage members of this committee to support CCS's request and speak with your colleagues in the House of Commons to support the needs of Canadians living with cancer.

Impacts to Canadians living with and beyond cancer

CCS recommends that the Government's commitment to data monitoring and research includes a focus on the long-term impact of public health measures and health system response on people living with cancer.

Canada's health care system is working at full capacity to fight COVID-19. But Canadians with cancer face an extra challenge: during this pandemic, they are also being told their treatments, tests, radiation, chemo and surgery are substantially altered or delayed. The health care system they rely on is now being forced to delay care, community support organizations for cancer are overwhelmed, and the emotional support of family and friends is restricted to a two-metre exclusion zone. What will the long-term effects of COVID-19 be for cancer patients? When the pandemic is over, there will be a significant backlog to our healthcare system with people with cancer who have gone untreated, hopeful their cancer has not spread as well as with people who delayed seeking medical attention for symptoms or delays in receiving diagnostic results. Now is the time to start identifying the data to collect and monitor so that the health system can respond effectively to minimize the impact of COVID-19 on people with cancer and their prognosis and survival.

Through CCS's support programs, primarily our helpline and online peer support community, CCS is able to identify themes of how COVID-19 is impacting the cancer community. The following themes have been gathered between March 16 and June 21 and are provided to the Committee to highlight the needs of people with cancer throughout the first wave of COVID-19 in Canada:

- Wondering if they are at an increased risk due to cancer treatment, cancer type or have had a previous cancer diagnosis.
- Looking for practical support that are no longer available due to program suspension.
- Asking if their treatment will be changed or what to do if COVID-19 has impacted current treatment and whether it will impact their prognosis.
- Sharing feelings of anxiety, depression or poor emotional wellbeing.
- Feeling isolated, overwhelmed and lacking support.

A more detailed summary of the themes is available in [Appendix A](#).

Additional challenges facing the cancer continuum

While these identified themes from CCS's support services are important to highlight to the Committee, there remain a number of additional cancer-related health policies that the Committee should continue to monitor, many of which were commitments in the Minister of Health's Mandate letter.

Palliative Care

CCS recommends that the Government continue to focus on the Minister of Health's mandate letter commitment to make home care and palliative care more available across the country. COVID-19 is highlighting the need for increased palliative care resources, care and support for Canadians. Approximately 83,300 Canadians will die of cancer this year without and before COVID-19.

Financial Strain

CCS recommends that the government extend the Employment Insurance Sickness Benefit to at least 26 weeks and follow through on Minister Qualtrough's mandate letter commitment. When Canadians face cancer, their struggle is not just medical but also financial. The reality is that people still have cancer during COVID-19 and need time away from work. The Employment Insurance Sickness Benefit currently provides 15 weeks of coverage, which is not adequate to cover the length of treatment for many people with cancer.

Research

There are potential long-term ramifications to the health research ecosystem as a result of COVID-19.

Access to clinical trials is being impacted. Challenges for patients participating in a trial may arise from; social distancing requirements, cancer centre restrictions, travel limitations, interruptions to the supply of investigational products, or because of the strain on hospital resources.

Many research labs across the country rely on research dollars from Canadian charities, such as CCS. The Canadian research ecosystem is facing devastating consequences as funding from charities becomes significantly reduced. Canada's leadership in cancer research requires and is a product of uninterrupted government and CCS financial support. The impact on research funding will be devastating. Without the donor support, research funding will have to be dramatically reduced, which translates to lost jobs, lost productivity and reducing the impact of Canadian science and new cancer treatments.

About the Canadian Cancer Society

The Canadian Cancer Society (CCS) is the only national charity that supports Canadians with all cancers in communities across the country. No other organization does what we do; we are the voice for Canadians who care about cancer. We fund groundbreaking research, provide a support system for all those affected by cancer and shape health policies to prevent cancer and support those living with the disease.

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Appendix A:

Through CCS's support programs, primarily our helpline and online peer support community, CCS is able to identify themes of how COVID-19 is impacting the cancer community. The following themes have been gathered over the past 14 weeks and are provided to the Committee to highlight the needs of people with cancer throughout the first wave of COVID-19 in Canada:

1. Wondering if they are at an increased risk due to cancer treatment, cancer type or have had a previous cancer diagnosis.

There is evidence supporting that people with cancer are at higher risk of more severe outcomes from COVID-19.^{3,4,5} Cancer is an underlying medical condition, about 60% of cancer cases expected to be diagnosed in 2019 were in individuals over 65 years of age. Some cancer treatments such as surgery, chemotherapy and radiation therapy, can weaken the immune system, making it harder to fight infections. To provide context to this theme, some questions CCS is receiving and has captured include:

- Are they at higher risk of COVID-19 because of their cancer type, current cancer treatment or cancer history?
- Do they need to self-isolate? How do they protect themselves or protection in their role as caregiver?
- Some patients are concerned about the potential for being at high risk, they are minimizing risk by discontinuing public-facing employment. This is also applicable to caregivers and reducing their exposure to someone who is at high risk.
- Some patients are concerned about their increased risk and visiting the hospital for follow-up where they believe they may contract COVID-19.

Little information is currently publicly available about the comorbidities of COVID-19 patients in Canada. Further research is required to understand the short- and long-term impacts of COVID-19 on people with cancer.

2. Looking for practical support that are no longer available due to program suspension.

CCS has received direct inquiries from patients looking for practical supports. There are programs and services previously offered by organizations, including CCS, that may no longer be available due to program suspension. There have been difficult decisions made to temporarily pause some services in order to keep people with cancer, staff and volunteers safe.

3. Asking if their treatment will be changed or what to do if COVID-19 has impacted current treatment and whether it will impact their prognosis.

³ Public Health Agency of Canada. (2020). Vulnerable populations and COVID-19. Retrieved from: <https://www.canada.ca/en/public-health/services/publications/diseases-conditions/vulnerable-populations-covid-19.html>

⁴ Dai M, Liu D, Liu M, Zhou F, Li G, Chen Z. (2020). Patients with cancer appear more vulnerable to SARS-COV-2: a multi-center study during the COVID-19 outbreak. *Cancer Discov.*

⁵ Kuderer NM, Choueiri TK, Shah DP, Shyr Y, Rubinstein SM, Rivera DR, Shete S, Hsu CY, Desai A, de Lima Lopes Jr G, Grivas P. (2020). Clinical impact of COVID-19 on patients with cancer (CCC19): a cohort study. *The Lancet.*

Evidence of health system utilization during the SARS outbreak demonstrates that cancer patients' referrals were not made, such as radiotherapy for cancer because of patient anxiety about contacting the health care system or lack of capacity within the system. At the time, there was also a decline in essential outpatient treatments.⁶ Many cancer treatments were delayed; the true impact of these decisions were never known during or after the SARS outbreak.⁷ There is an opportunity for the government to take a leading role and to track outcomes for people with cancer and to learn from the government response to SARS.

While much of the evidence on this theme is qualitative, the inquiries through the support services of CCS bring to the surface the emerging concerns of Canadians about whether their treatment will be impacted and from those whose treatments are being impacted, and their potential prognosis including disease progression and survival. As well, there have been many stories^{8,9} in the media that describe similar situations across the country of cancelled or postponed treatments. There will be long term implications of COVID-19 to the cancer community.

4. Sharing feelings of anxiety, depression or poor emotional wellbeing.

As part of the health system response to COVID-19, hospitals are implementing visitor restrictions so that people with cancer that are receiving their treatment must attend these appointments alone or cannot receive visitors while in hospital recovering from treatment. Caregivers are classified as visitors even though they play an integral role in a patient's care team with informational, emotional and practical support. While this necessary public health measure is to limit exposure to as many people as possible, one of the unintended outcomes of this measure is that patients' anxiety is increasing. Caregiver presence reduces patient anxiety, supports patient safety and improves the accuracy and quality of shared information.¹⁰ Since caregivers cannot attend appointments with patients, they are unable to ask clinicians directly how they can provide care to the patient according to their updated medical status. Not being able to support their loved ones with in-person emotional or practical supports also causes distress for caregivers.

A report by Mental Health Research Canada reports that since the COVID-19 outbreak, anxiety levels have quadrupled and depression levels have doubled for Canadians, finding that more than half of Canadians feel that both federal and provincial governments should be doing more to support the mental health of Canadians.¹¹ A recent survey conducted by

⁶ Woodward, G. et. Al. (May 2004). Utilization of Ontario's Health System During the 2003 SARS Outbreak. Retrieved from: <https://www.ices.on.ca/Publications/Atlases-and-Reports/2004/Utilization-of-Ontarios-health-system>

⁷ The Honourable Mr. Justice Archie Campbell. (December 2006). The SARS Commission. Retrieved from: http://www.archives.gov.on.ca/en/e_records/sars/report/v1-pdf/Volume1.pdf

⁸ Barak, C. (March 28, 2020). "I'm angry and I'm scared": Patient with cancer concerned over treatment delay during pandemic. CBC. Retrieved from: <https://www.cbc.ca/news/health/cancer-covid19-1.5512599>

⁹ Jones, A. & Rinaldo, S. (June 14, 2020). Delay cancer treatment or risk COVID-19? Doctors and patients weigh the risks. CTV News. Retrieved from: <https://www.ctvnews.ca/health/coronavirus/delay-cancer-treatment-or-risk-covid-19-doctors-and-patients-weigh-the-risks-1.4984111>

¹⁰ Drury, J. (April 2020). Family Caregivers as Essential Partners in Care: More Than Just a Visitor. Retrieved from: <https://www.cfhi-fcass.ca/NewsAndEvents/blog/blog-post/cfhi-blog/2020/04/20/family-caregivers-as-essential-partners-in-care-more-than-just-a-visitor>

¹¹ Mental Health Research Canada. (April 2020). Mental health during COVID-19 outbreak, wave one. Retrieved from: <https://www.mhrc.ca/wp-content/uploads/2020/05/Full-Report-of-Findings-of-Survey-FINAL.pdf>

the Quebec Cancer Coalition, found that nearly two-thirds of the respondents are experiencing anxiety or worsening of existing mental health challenges as a result of the pandemic. Additionally, 61% of respondents reported that their access to health care and services has been impacted by COVID-19.¹² Finally, one of the recommendations from the survey participants is that they want access to evidence-based information through a phone line. This is further evidence to support CCS's recommendation that the Government provide informational and psychosocial supports for people with cancer and their caregivers.

5. Feeling isolated, overwhelmed and lacking support.

CCS is receiving inquiries from patients about feelings of isolation, caregivers feeling overwhelmed, and people with cancer and their caregivers looking for support. The recent report by Mental Health Research Canada found that 4 in 10 are feeling the negative impacts of self-isolation on their mental health.¹³ There are trends that CCS hopes to highlight to the committee which includes the stress and burnout of oncologists and caregivers while looking after their loved one, or patient with cancer. Patients and caregivers who have relied on support to do their groceries, a drive to their treatment or human connection are even further isolated because their support system is no longer available in the same capacity it was prior to COVID-19.

¹² Pomey, MP., et. al. (April 13, 2020). Survey Summary Report: Impact of COVID-19 pandemic measures on cancer patients in Quebec. Quebec Cancer Coalition.

¹³ *IBID*. Mental Health Research Canada.
