

2023



Research Report:  
Publications by  
religious organisations  
during the Covid-19  
pandemic in Canada

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# Table of Contents

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01

About  
the Project

02

Sample

03

Methods and  
Coding

04

Short  
summaries of  
analysis of  
religious group

05

DISCOURSES  
ABOUT HEALTH,  
ILLNESS AND  
SCIENCE

06

RELATIONSHIPS  
WITH  
GOVERNMENTS  
AND  
POLICYMAKERS

07

DIGITAL  
INNOVATIONS

08

References

09

Appendix

# About the Project

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The role of religion has changed during the COVID-19 pandemic, taking on renewed significance in many societies, including those experiencing secularisation. RECOV-19 is a three-year, multi-disciplinary research project analysing the role of religion in societies emerging from the COVID-19 pandemic. RECOV-19 compares the changing role of religions in four secularising global north contexts: Canada, Germany, the Republic of Ireland/Northern Ireland, and Poland.

In these contexts, it analyses the majority (Christian) and minority (Islam and others) religions' role in three key areas:

- Constructing **discourses around health, illness, and science**, including promoting the observance (or not) of lockdown restrictions and public health measures like vaccines
- Lobbying and liaising with **governments and policymakers**, including how religious groups have contributed to debates emerging from the pandemic, like addressing inequalities and mental health issues
- Incorporating **digital innovations** like blended online/in-person approaches to religious practices

The project utilises a mixed-methods approach, including analysis of documents produced by religious groups, analysis of media sources, surveys, and interviews. It features a multi-disciplinary team with researchers from Queen's University Belfast, the University of Montreal, the University of Bremen, and the University of Warsaw.

RECOV-19 is funded through the Trans-Atlantic Platform (T-AP) for the Social Sciences and Humanities, a collaboration between humanities and social science research funders from the Americas and Europe. It was awarded under T-AP's 'Recovery, Renewal and Resilience in a Post-Pandemic World' programme.

The following report provides an overview of the project's first step: analysis of documents and publications released by religious organisations regarding the coronavirus pandemic on the island of Ireland. For reports of the other countries, see: [Ireland/Northern Ireland](#) | [Poland](#) | [Germany](#)

^ The above description is an integral part of the project proposal, and the authors are Gladys Ganiel, Solange Lefebvre, Sławomir Mandes, Kerstin Radde-Antweiler.

## Sample

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The sample of documents analysed in this report were retrieved from four religious organisations. Two Majority Religions in Canada were chosen, and two religious organisations which have minority status in the country. Majority and minority religious status was defined as relating to prominence in the population. Documents retrieved were official documents from recognised Authorities or representative bodies from the religious organisations. Documents retrieved were chosen if they were Official statements or positions relating to Covid19, Government restrictions and guidance, or digital media religion, excluding publications or reports which did not fall under this remit (for example, a publication announcing that a specific priest/Bishop has contracted Covid). Linguistically, Canada has a very specific configuration as a bilingual country based on the two main colonizing powers (French and English). In our analysis and research, we have been careful to consider both languages. We should point out three facts in this regard. First of all, the research is based at the University of Montreal the largest French university in Canada. Secondly, the First Nations, who were in the territories before colonization, occupy an important space in Canada and present very varied religious affiliations. Our research does not take indigenous groups into account as such, but they are included in the various groups under study, especially Christians. Thirdly, Canada is one of the most multicultural countries in the world because of the various waves of immigration that have occurred throughout its history since colonization. People declaring that they do not have a religion (non-religious or nones) have become a large demographic group, from 16.5% in 2001 to 23.9% in 2011, then to 34.6% in 2021 (Statistics Canada 2022). While this represents the largest increase, religion remains an important factor in Canadian life. Thus, we have chosen two majority religions and the two largest minority religions according to the last census, in order to analyze their role.

The first majority religion chosen is Roman Catholicism, with 29,9% of the Canadian population consisting of Catholics. The Catholic Church is quite centralized in Canada. We take into account the national level of the Church organization , which is the Canadian Conference of Catholic Bishops, even though it is not a central body for the Catholic Church. Then, at a regional level, we have chosen various dioceses across Canada: British Columbia, Alberta and Manitoba (Western Canada); Quebec and Ontario (being Canada's largest provinces); and New Brunswick and Nova Scotia (Eastern Canada) to ensure representativeness.

## Sample

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The second majority religion selected is Protestantism. In Canada, 13% of the population identify as Protestants. Within our sample, as a matter of representativeness, we chose documents from the Anglican Church and the United Church of Canada at the national level, and several groups at a regional level, and we added Evangelicals (0,2% of the population) and the French Baptist Union (about 10,000 members of the 1,2% Baptists in Canada). There are several organizations but, as is the case with Muslims, there is no single representative.

The first minority religion selected in Canada is Islam. There is no exclusive or unique representative for Muslims (4,9% of the population): there are several groups or associations. For our research, two main Muslim groups were chosen for analysis because of their size and their investments in diverse communication networks; they present themselves as pan-Canadian. These are the Muslim Association of Canada (MAC) and the Islamic Supreme Council of Canada (ISSC). These two organizations are the main representatives of the Muslim community as a religious minority in Canada, as well as the main producers of religious statements and guidelines regarding COVID during the pandemic.

The second minority religion chosen is Judaism. Jews consist of 0,9% of the population. Most Jewish organizations are under the umbrella of the Centre for Israel and Jewish Affairs (CIJA). As part of CIJA, the Jewish Federations of Canada-UJA (JFC-UJA) has 12 organizations across Canada and 15 other partners and affiliate organizations in Canada and around the world, including the Canadian Rabbinic Caucus. The Canadian Rabbinic Caucus is led by an 18-member executive committee (six Reform, six Conservative, and six Orthodox) which, in turn, elects co-chairs. Our sample consists of various documents produced by different Canadian Jewish organizations: the Center for Israel and Jewish Affairs (CIJA–Atlantic), the United Jewish Appeal—Federation of Greater Toronto (UJA – Greater Toronto), the Jewish Federation of Winnipeg, the Jewish Federation of Greater Vancouver, the Jewish Federation of Edmonton, and the Hamilton Jewish Federation. The Hasidic Jewish community is not a member of CIJA, and they do not have a website.

## Sample

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We felt that choosing a few interreligious organizations would be interesting for this research so there would be different voices in the discussion. Also, it was significant that one of them was created in Quebec during the pandemic in order to have a voice within the dialogue between the government and religious groups. Our sample focuses on two interreligious organizations. The first is the Canadian Council of Churches (CCC), an ecumenical and interreligious group founded in 1944 that, according to its website, is comprised of 26 member Church groups (regular members and affiliate members), including Catholic, Anglican, Evangelical, Baptist, Lutheran, Reformed, Orthodox, and other Protestant traditions. The second interreligious group is the Quebec Interreligious Roundtable (QIR) which was founded during the pandemic in 2020, to meet the need of creating connections between religious communities in Quebec (Jews, Muslims, Christians, and mormons have joined later) and the government regarding the role of religion and its place as an essential community service.

## Sample

Country	Religious Organisations	Number of documents (statements/guidelines/press releases)
CANADA	majority 1: Roman Catholic Church	137
	majority 2: Protestant Churches	140
	minority 1: Muslims	14
	minority 2: Jews	24
	Interreligious organizations: Canadian Council of Churches	3
	Interreligious organizations: Quebec Interreligious Roundtable	15
		333

Table 1. Number of documents per religious organisation for Canada. Source: own elaboration

^ The Sample was originally conceived during the project proposal phase, authored by Gladys Ganiel, Solange Lefebvre, Sławomir Mandes, and Kerstin Radde-Antweiler. The content presented above has been revised and edited by Mathieu Colin and Denitsa Tsvetkova.

## Methods and Coding

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Qualitative content analysis aims to analyse large amounts of texts qualitatively and systematically. The relatively structured approach of deductive coding allows different researchers to produce comparable results even if the documents they are analysing are written in different languages or are different types of texts. The coding system was developed deductively, following Mayring's (2014:95, 2020:13) steps of deductive category assignment. In the first step, the three core research areas (discourses around health, illness and science; relations with governments and policymakers; digital innovations) were established as core categories. Based on the literature on Covid and religion in the four countries as well as theoretical knowledge on religion and digital media, state-religion-relations, secularisation theories and processes of change in religions, subcategories were developed and defined with examples from the data material.

After selecting the codes, the team ensured that each researcher had the same understanding of the meanings of the code in order to constitute an intercoder consistency procedure. A codebook (see code tree in Appendix 1) was written, and definitions of each code were added and vetted by each team member. Then, a coding test was decided to ensure that each researcher could code the same way. The team chose one text, coded using the code tree, and then checked and debated it among the researchers. This procedure was repeated three times until no significant coding difference was noticed. Even though the researchers were using the same code tree in order to keep the comparative perspective as the objective, new individual codes related to the specific context of each country could be created (5 in Germany, 4 in Ireland, 0 in Poland and 3 in Canada).

<sup>^</sup> The above methodology was developed by a team of researchers: Mathieu Colin, Hannah Grünenthal, Caoimhe Ni Dhonaill, Marta Kołodziejaska, and Katarzyna Rabiej-Sienicka.



# Findings

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## DISCOURSES ABOUT HEALTH, ILLNESS AND SCIENCE



### Discourses about health, illness and science in the **Roman Catholic Church**

- At first, CCCB is wary about vaccines that are produced with fetal tissues but still encourage vaccination when only these vaccines are available.
- Dioceses are much more positive and supportive of any kind of vaccines.
- Death is rarely mentioned inside the statements and internal documents.
- Theological justifications, biblical stories and parables are widely used to justify the pandemic and the behavior to adopt from a Christian narrative.

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## Discourses about health, illness and science in the Protestant Churches

- Vaccination is widely supported and encouraged, especially within the Anglican Church and United Church, but less evoked for Baptists and Evangelicals.
- The virus is never minimized or downplayed, but seen a dangerous outbreak that threaten the most vulnerable.
- Theology, parables and biblical stories are very often used to justify their discourse and integrate the pandemic within the Christian narrative.
- Religious response to the pandemic is prayers, always in compliance with the restrictions.

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## Discourses about health, illness and science in the Muslims

- Muslims seem to use a much more secularized and scientific discourse than Christian religions.
- Physical health and protection of the community are very important, prayers have to adapt to the various health guidelines of the government.
- Vaccination is widely supported and encouraged, mosques are even used as vaccination centers.
- The virus is taken very seriously as a dangerous disease but death is rarely mentioned.
- Charitable efforts and fundraiser initiatives are a huge part of the Muslim discourse.

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## Discourses about health, illness and science in the Jews

- Protection of the community and of Jewish identity is paramount.
- The outside world is barely mentioned, leading to a kind of “self-isolation”.
- Vaccination efforts are supported but from a neutral perspective and not discussed as positive or negative in our sample.
- Theological references are pretty common to justify the statements.

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## RELATIONSHIPS WITH GOVERNMENTS AND POLICYMAKERS



### Relationships with governments and policymakers in the **Roman Catholic Church**

- At first, CCCB is mainly preoccupied with the ethical concerns regarding the vaccine but support the efforts of the government in preventing the transmission.
- All dioceses comply with the official health guidelines decided by federal or local governments.
- The Catholic Church, through its dioceses, address the issue of conspiracy theories and anti-vaccine/anti-measures movements within radical Catholic groups and in other religious groups such as some Evangelical movements and condemn them.
- Catholic churches are struggling with capacity guidelines and limits of the number of people for in-person worships, decreased donations, the complexity of informing the parishioners of shifting rules, and the difficulty of maintaining in-person services.

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## Relationships with governments and policymakers in the Protestant Churches

- All the different organizations call to comply with restrictions.
- Organizational issues are very common and seen as challenges: adapting to restrictions, delaying weddings and funerals, especially at the beginning of the pandemic when the vaccine was not available.
- Religious practice has also been impacted by the various restrictions. Restrictions have affected the churches capacity to gather its parishioners in the same place, to hold in-person rituals at the beginning of the pandemic or with limited access during the different phases, as well as modification and transformation of religious services to adapt to health protocols and guidelines.
- Evangelicals are preoccupied by the issue of freedom of belief which they feel is threatened by some restrictions, and urges the government to consider that churches (in general and not only Evangelicals) are of significant importance for the health of society.

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## Relationships with governments and policymakers in the Muslims

- Muslim leaders call for constant cooperation, compliance and respect for people outside their religious community.
- Muslims are eager to cooperate in order to exemplify the inclusion and integration emphasized in the mission statement of the organizations.
- Muslims are eager to show that their religious practices are immediately adapted to national and provincial health guidelines and that they comply with health recommendations.
- We also note an absence of conflict with policymakers.

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## Relationships with governments and policymakers in the Jews

- Generally, Jews barely mention cooperation or conflict with state and policymakers.
- Jewish authorities stress the importance of the various health guidelines enforced by provincial and federal authorities, as this is part of Jewish values. Generally, all groups studied have produced protocols and health resources to collaborate with health services.
- All members are asked to respect social distancing and health guidelines, and are also advised to celebrate religious events like Passover or Hanukah at home.
- Some documents offer advice on how to celebrate while accommodating various government restrictions, and how to incorporate the consequences of COVID-19 into various religious practices.



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## Relationships with governments and policymakers in the Interreligious Organisations

- The Canadian Council of Churches (CCC) asks each member to respect and follow the various protocols and health guidelines, and to trust medical authorities as their common duty.
- Like other Christian organizations, these behaviors are justified using references to theology and biblical stories to highlight the Christian response to the pandemic and the virtues Christian must demonstrate during this crisis.
- Quebec Interreligious Roundtable's mentions of its constant contact with policymakers is highlighted throughout the documents, and strict health protocols are decided and issued by religious leaders, in accordance with health services guidelines.
- Churches and religious leaders are considered essential elements of society and believers are defended by the QIR.
- Government is also targeted by demands from religious leaders, asking that churches be included within reopening protocols and therefore considered on the same footing as theaters and cinemas.

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## DIGITAL INNOVATIONS



### Digital Innovations in the Roman Catholic Church

- The most frequent tools and platforms are Zoom, Facebook Live, YouTube, ParishStaq (a tool used for faster donation management), Skype, some TV platforms like CTV or Vision TV mentioned. Twitter, Instagram and WhatsApp are mentioned less frequently.
- Digital innovations are seen as a positive and efficient way of promoting the Word of Christ and as promising for world evangelism.
- Even though tension remains regarding the importance of digital technology and the need for in-person rituals, because of the theological importance of physical rituals such as the Eucharist for instance, online services are considered a novel way to reach people through the comfort of their home and to respect health guidelines.
- Another issue addressed is the transition to normalcy after the end of restrictions, especially for children whose classes have been moved online and who are afraid to come back to school.

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## Digital Innovations in the Protestant Churches

- The most popular platforms are Zoom, Skype, Facebook Live and YouTube, a list that is fairly similar to the other religious groups studied in our sample.
- We note that there is not the same tension as Catholics between online and offline rituals: in-person services are always preferred, but the United Church insists on the fact that online service does not alter or modify the importance of community and rituals.
- The tension between offline and online services, that is present in the Catholic documents, seems less visible in the Anglican Church's documents. The in-person dimension is preferred, but technology is seen from a positive and even a fun perspective that can reach parishioners while keeping everyone safe and sustain the sacred bond of the community.
- We also note that religious authorities were quick to react to the pandemic and proposed online services at the very start of the pandemic when churches were closed, even in a rudimentary way, at least for the Anglican Church and United Church.
- Evangelicals don't seem to have a very developed set of discourse regarding digital innovations.

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## Digital Innovations in the Muslims

- Muslims do not seem to have a developed set of discourses related to virtual innovations.
- Websites, Facebook pages or YouTube channels are mentioned very briefly throughout the documents, providing information on guidelines, conferences prayers, and particularly within the context of online classes for children.
- Digital technology is not seen in a positive or a negative way, but rather as a necessity to overcome the challenge of the pandemic.

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## Digital Innovations in the Jews

- Similar to Muslims, digital innovations of Jews seem to be underdeveloped, or at least discussed less frequently.
- They are presented as a necessary, required and efficient means of practicing or celebrating important religious events, but they are not presented in a positive or negative light in themselves, only as the logical steps evolving to adapt to the pandemic.
- Zoom seems to be the most popular platform to organize and set up events like Chanukah.
- Skype and Google Hangouts are also mentioned, as well as websites gathering information about procedures, guidelines, and advice.

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## References

Mayring, Philipp (2014). Qualitative content analysis: theoretical foundation, basic procedures and software solution. Klagenfurt. <https://nbn-resolving.org/urn:nbn:de:0168-ssoar-395173>.

Mayring, Philipp (2000). Qualitative Content Analysis [28 paragraphs]. Forum Qualitative Sozialforschung / Forum: Qualitative Social Research, 1(2), Art. 20, <http://nbn-resolving.de/urn:nbn:de:0114-fqs0002204>.

## Tables

**Table 1.** Number of documents per religious organisation for Canada. Source: own elaboration

## Appendix

**Appendix 1.** Code tree

**Appendix 2.** Table 2. Overview of codes per religious organisation (total number of coded segments for all documents per organisation for three years) for Canada. Source: own elaboration

**Appendix 3.** Context: timeline of the pandemic in Canada

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# The Changing Role of Religion in Societies Emerging from Covid-19

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RECOV-19 is a three-year, multi-disciplinary research project analyzing the role of religion in societies emerging from the COVID-19 pandemic.

The project investigates whether or to what extent the role of religion has changed during the pandemic in four contexts: Canada, Germany, the Republic of Ireland/Northern Ireland, and Poland. It has three main areas of investigation: discourses around health, illness, and science; changing relationships between religions and the state; and religious adaptations to the digital world.

RECOV-19 is funded through the Trans-Atlantic Platform (T-AP) for the Social Sciences and Humanities, a collaboration between humanities and social science research funders from the Americas and Europe. It received an award under T-AP's 'Recovery, Renewal and Resilience in a Post-Pandemic World' programme.

^ The above description is an integral part of the project proposal, and the authors are Gladys Ganiel, Solange Lefebvre, Sławomir Mandes, Kerstin Radde-Antweiler.

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# Appendix 1

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## Code tree

### DISCOURSES ABOUT HEALTH, ILLNESS AND SCIENCE

- Physical health
- Mental wellbeing
- Religious practices
- Justification by scientific/factual arguments
- Justification by theological arguments
- Justification by moral/ethical arguments
- Attitudes towards vaccination
  - Pro vaccination
  - Mixed feelings towards vaccination
  - Anti vaccination
- Role of community during the pandemic
- Role of relationships during the pandemic

### RELATIONSHIPS WITH GOVERNMENTS AND POLICYMAKERS

- Freedom of belief
- Key political/public/religious actors
- Levels of cooperation / conflict
- Court cases
- Wider societal impacts of restrictions/state actions
  - Social impacts of state restrictions
  - Religious impacts of state restrictions
- Impact of restrictions on churches/religion
  - Financial
  - Organisational issues
  - Religious practices
  - Religious authority/authorities
  - Interreligious dialogue
- Anti-corona movements
- Post-Restriction Plans

### DIGITAL INNOVATIONS

- Non-digital media
- Digital tools/platforms used
- Virtual religious rituals and practices
- Impact on religious authority and community
- Impact of media on the society
- Impact of media on religious organization
- Attitudes towards digital technology
- Key digital actors

## Appendix 2

Table 2. Overview of codes per religious organisation (total number of coded segments for all documents per organisation for three years) for Canada. Source: own elaboration

Code	majority 1	majority 2	minority 1	minority 2	Interreligious organizations	
	Roman Catholic Church	Protestant Churches	Muslims	Jews	Canadian Council of Churches and Quebec Interreligious Roundtable	total
<b>HEALTH, ILLNESS, SCIENCE</b>						
physical health	28	44	7	2	1	82
wellbeing	12	9	1	4	0	26
death	18	6	0	0	2	26
religious practices	26	50	8	1	0	85
justification by scientific/factual arguments	8	21	9	0	2	40
justification by theological arguments	73	62	5	5	5	150
justification by moral/ethical arguments	10	10	0	0	4	24
attitudes towards vaccination > pro vaccination	17	11	2	1	0	31
attitudes towards vaccination > mixed feelings towards vaccination	4	0	0	0	0	4
attitudes towards vaccination > anti vaccination	0	0	0	0	0	0

## Appendix 2

role of community during the pandemic	30	33	7	20	5	95
role of community during the pandemic	5	0	0	2	0	7
<i>religious initiatives or charities</i>	5	10	2	1	0	18
<i>consequence of the pandemic on social and religious attitudes</i>	16	15	0	0	0	31
<b>Total: Discourses about health, illness and science</b>	<b>252</b>	<b>271</b>	<b>41</b>	<b>36</b>	<b>19</b>	<b>619</b>
<b>RELATIONSHIPS WITH GOVERNMENTS AND POLICYMAKERS</b>						
freedom of belief	6	13	0	0	14	33
<i>freedom of expression</i>	1	4	0	0	1	6
key political/public/religious actors	4	5	1	0	4	14
levels of cooperation/conflict	63	110	17	4	28	222
court cases	0	3	0	0	1	4
wider societal impacts of restrictions/state actions > social issues	19	14	1	12	7	53
wider societal impacts of restrictions/state actions > religious	2	7	0	0	3	12

## Appendix 2

impact of restrictions on churches/religion > financial	8	12	1	2	0	23
impact of restrictions on churches/religion > organisational issues	68	107	2	5	13	195
impact of restrictions on churches/religion > religious practices	41	78	3	7	9	138
impact of restrictions on churches/religion > religious authority/ authorities	9	11	1	1	7	29
impact of restrictions on churches/religion > interreligious dialogue	3	3	0	0	17	23
anti-corona movements	5	0	0	0	0	5
post-Restriction Plans	0	0	0	0	0	0
<b>Total: Relationships with governments and policymakers</b>	<b>229</b>	<b>367</b>	<b>26</b>	<b>31</b>	<b>104</b>	<b>757</b>
<b>DIGITAL INNOVATIONS</b>						
digital tools/platforms used	29	41	1	2	1	74

## Appendix 2

virtual religious rituals and practices	19	41	2	4	1	67
impact on religious authority and community	22	26	2	4	2	56
impact of media on the society	2	0	0	0	0	2
impact of media on religious organisation	9	20	2	1	0	32
attitudes towards digital technology	11	7	0	1	0	19
key digital actors	0	0	0	0	0	0
contrast with non-digital media	0	0	0	0	0	0
<b>Total: Digital Innovations</b>	<b>92</b>	<b>135</b>	<b>7</b>	<b>12</b>	<b>4</b>	<b>250</b>
<b>TOTAL CODED SEGMENTS</b>	<b>573</b>	<b>773</b>	<b>74</b>	<b>79</b>	<b>127</b>	<b>1626</b>

^ Codes written in italics in the codebook are additional individual codes related to the specific context of each country.

## Appendix 3

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### Context: timeline of the pandemic in Canada

Total registered cases until March 2023: approx. 4 625 842

Total Covid-related deaths: approx. 51 930

2020

**25/01/2020** - On Jan. 25, a Toronto man in his 50s who returned from the Chinese city of Wuhan -- the epicentre of the outbreak -- becomes the first presumptive case of the novel coronavirus in Canada. The man is placed in isolation in Toronto's Sunnybrook Hospital, later The National Microbiology Lab in Winnipeg confirms that he is the first case and his wife, the second one in Canada.

**06/02/2020** - Health officials in British Columbia say a man in his 40s who travels to China for work is presumed to have COVID-19. The man is in self-isolation at his Vancouver home. The first COVID-19 case is declared on Alberta, on February 6. The person was in self isolation.

**07/02/2020** - On February, 7, a plane carrying more than 200 Canadians from Wuhan arrives at CFB Trenton in eastern Ontario, where they start a 14-day quarantine.

**27/02/2020** - On February, 27, Quebec public health officials report the province's first presumptive case, a woman from the Montreal region who recently returned from Iran.

**05/03/2020** - British Columbia announces on March 5, eight new cases, including Canada's first-ever case possibly contracted within the community, rather than through travel or contact with other cases.

**09/03/2020** - First fatality in Canada. "They are exceptional circumstances calling for exceptional measures.", says PM Trudeau.

**13/03/2020** - On March 13, the Government of Alberta imposes the first restrictions: prohibition of gathering more than 250 people.

**11/03/2020** - When on March 11 The World Health Organization declares COVID-19 a pandemic, Canada has more than 100 cases. They will pass to 1000 on March 20. NBA suspend its season. About 4,000 Canadians are trapped on cruise ships. They will be starting to repatriated only on March 23. After a few days provinces declared a state of emergency and stay home orders, suspending the public gathering, including worship services.

The federal government announces Parliament will go on break, on March 13 and Quebec closes schools, universities, colleges.

**14/03/2020** - Apart from Americans and a few exceptions, Canada announces it is closing its borders to non-Canadians.

**15/03/2020** - Several Canadian provinces start closing places of worship for the first months of the pandemic.

## Appendix 3

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**17/03/2020** - On Tuesday, March 17 Premier Doug Ford (ON) declares an emergency, activating sweeping powers to order a wide range of closures and other restrictions aimed at limiting the spread of the virus. ON.

**18/03/2020** - On March 18, Canada and the United States announce they will close their shared border to non-essential traffic, an historical step.

**22/03/2020** - On March 22, Quebec closes shopping malls, restaurants and salons. Canada says it won't compete in the Tokyo Olympics or Paralympics if held this summer, two days later, they will be postponed officially. On March 25 the Emergency aid bill passes. Canada makes 14-day quarantine for all arrivals mandatory.

**30/03/2020** - On March 30, the Defence Minister Harjit Sajjan says 24,000 Canadian troops ready to help deal with COVID-19, but Quebec and Ontario will call them only on April 22 to help out in long-term care homes. Trudeau says new wage subsidy program will cover all businesses whose revenue has dropped by at least 30 per cent because of COVID-19.

**02/04/2020** - On April 2, COVID-19 death toll passes 100 in Canada.

**09/04/2020** - On April 9, Ottawa projects 4,400 to 44,000 Canadians could die of COVID-19. Government announces more than one million people lost their jobs in March and the Federal government announces nearly 5.4 million Canadians are receiving emergency aid.

**15/04/2020** - Canada announces 1,000 deaths related to coronavirus

**23/04/2020** - On April 23, Canadian death toll passes 2,000 as country announces it'll pour \$1/1 billion into vaccine testing. Ontario Premier Doug Ford chokes back tears as he discusses the crisis in long-term care homes.

**25/04/2020** - On April 25, New Brunswick introduces a two-household bubble, allowing people to interact with others. This is not a case on another provinces.

**28/04/2020** - On April 28 Canada hits 50,000 cases.

**04/05/2020** - On May 4, Restrictions begin to lift in several provinces including Quebec and Manitoba. The worship places remain closed in Quebec.

**07/05/2020** - On May 7, Canada completes its millionth COVID-19 test.

**08/05/2020** - On May 8, the unemployment rate rockets up to 13 per cent, the second-highest figure on record in Canada.

**11/05/2020** - On May 11, some Quebec schools reopen and Ontario stores start offering curbside pickup.

**12/05/2020** - Death toll passes 5,000 on May 12.

## Appendix 3

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**26/05/2020** - On May 26, a report from the military helping battle COVID-19 in five long-term care facilities in Ontario reveals extreme neglect and exposes the extent of the horrific conditions facing residents.

**29/05/2020** - On May 29, at least 41 staff and students test positive for COVID-19 in the first two weeks after elementary schools outside the Montreal area reopen. However, Quebec will be the country/province with more school days in presence during the pandemic in the world.

**12/06/2020** - On June 12, Ontario enters Stage 2 of its reopening, except for Toronto, Windsor-Essex and Peel region.

**18/06/2020** - Canada officially records more than 100,000 cases on June 18, of COVID-19 over the length of the pandemic.

**18/07/2020** - On July 18, Quebec becomes the first province in Canada to require mask-wearing in all indoor public places.

**31/07/2020** - On July 31, a voluntary smartphone app that can warn you if you've come into close proximity to someone who has tested positive for COVID-19 becomes available to download.

**03/08/2020** - Quebec increases the limits on indoor and outdoor public gatherings from 50 people to 250 people on August 3. The province's health minister says despite the relaxed rules, COVID-19 continues to circulate in Quebec, especially among young people.

**21/08/2020** - On Aug. 21, Canada takes a major step toward producing personal protective equipment, as Trudeau and Ontario Premier Doug Ford announce an agreement with 3M. The company will produce up to 100 million medical-grade N95 masks a year at its plant in Brockville, Ont.

**08/09/2020** - Hundreds of thousands of children and teenagers across Canada re-enter classrooms for the first time in six months on September 8. Alberta and Quebec are among the first to report new cases of COVID-19 related to the reopening of schools.

**19/09/2020** - Nunavut reports its first confirmed cases of COVID-19 on September 19.

**23/09/2020** - On Sept. 23, in an address to the country, Trudeau says the second wave of COVID-19 is already underway. He says families won't likely be able to gather for Thanksgiving, but it is not too late to save Christmas. Some pharmacies across Ontario start offering appointment-only COVID-19 testing. Tougher COVID-19 restrictions are also reimposed in Winnipeg and Ontario due to a spike in cases. In Ontario, Premier Doug Ford says bars and restaurants will have to stop serving booze at 11 p.m. -- and strip clubs must close entirely.



## Appendix 3

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**30/09/2020** - On September 30, parliamentarians unanimously pass Bill C-4 to usher in a new batch of COVID-19 benefits. For Canadians left jobless or underemployed because of the pandemic, the legislation supplants the CERB support program with a more flexible and generous employment insurance regime.

**01/10/2020** - On October 1, stringent new rules take effect in three Quebec regions at the heart of rising COVID-19 case counts in the province. Bars, cinemas and restaurant dining rooms are ordered closed for at least 28 days in Montreal, Quebec City and Chaudiere-Appalaches. Restaurants are still allowed to offer takeout. The strictest of the new measures include prohibiting private gatherings. Violators could face a \$1,000 fine.

**28/10/2020** - A report from Canada's chief public health officer, published on October 28, focusing on the first wave of the COVID-19 pandemic says Canada ranks 26th in the world for total deaths per million population. Dr. Theresa Tam's report says more support and stricter rules are now in place in long-term care facilities that should help Canada avoid a repeat of the spike in deaths seen in the spring.

**30/10/2020** - Yukon records its first death from COVID-19 on October 30.

**16/11/2020** - On November 16, Canada's COVID-19 case count tops 300,000 -- less than a month after it crossed the 200,000 threshold.

**26/11/2020** - On November 26, the Federal health officials say Canada has purchase agreements with seven COVID-19 vaccine producers. New Brunswick becomes the latest Atlantic province to opt out of the so-called bubble and demand anyone entering the province self-isolate for 14 days on November 26. The province also introduces heightened public health measures in the Fredericton area.

**27/11/2020** - On November 27, Trudeau says most Canadians should receive the COVID-19 vaccine by September 2021.

**02/12/2020** - On December 2, Johnson & Johnson begins the process of applying for emergency approval of its COVID-19 vaccine from Health Canada and the European Medicines Agency, while Pfizer and BioNTech's COVID-19 vaccine is given permission for emergency use in the U.K. The Catholic Church will react.

**04/12/2020** - On December 4, Canada records more than 400,000 cases of COVID-19, just 18 days after it hits the 300,000 mark. It took six months for Canada to record its first 100,000 cases, four months to reach 200,000 and less than a month to hit 300,000.

## Appendix 3

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**07/12/2020** - On December 7 Trudeau says Canada will receive up to 249,000 doses of Pfizer's COVID-19 vaccine this month. The next day, partial results published in the medical journal Lancet suggest the COVID-19 vaccine candidate from Oxford University and AstraZeneca is safe and about 70 per cent effective. Two days later, Health Canada approves national use of Pfizer and BioNTech's COVID-19 vaccine. The decision clears the way for the delivery of up to 249,000 doses this month.

**14/12/2020** - On December 14, the first doses of the Pfizer vaccine are administered to people in Quebec and Ontario.

### 2021

**09/01/2021** - In Quebec, a strict curfew between 8pm and 5am is decided.

**29/01/2021** - The federal government announces new travel restrictions, including that individuals travelling on foreign flights would be required to take COVID-19 PCR test on arrival and quarantine in an approved hotel at their expense.

**26/02/2021** - Health Canada approve the Oxford–AstraZeneca COVID-19 vaccine for use.

**26/03/2021** - In Quebec, places of worship in red zones are limited to 25 persons in-door.

**18/05/2021** - In Quebec, half of the population has been vaccinated.

**28/06/2021** - Every regions of Quebec is considered a green zone.

**02/06/2021** - In Ontario, Premier Ford announces that in-person classes at schools will remain suspended through the end of the school year, citing concerns over variants.[227] Ford also states that the province was also considering moving up the date for Step 1

**01/09/2021** - In Quebec, the vaccine passport becomes mandatory to access some places where there's a high risk of transmission.

**25/10/2021** - In Ontario, capacity limit restrictions are lifted in settings where showing proof of vaccination is required, such as Restaurants, Bars, Gyms, Casinos, Bingo Halls, Other Indoor Meeting and Event Spaces, and Gaming Establishments.

### 2022

**03/01/2022** - On January 3, the Ontario Government announces that Ontario would be moving into modified Step 2 from January 5 for a period of at least 21 days (January 26; this may be extended based on public health trends); closing indoor dining room, gyms, movies theatres and schools.

## Appendix 3

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**09/01/2022** - In January 9, 2022, is the peak of the fifth with 443 676 active cases and 7507 death. 50 days after the peak, on February 28, 2022, the active cases are 110 504. On January 28, 2023 the total deaths on Canada are 50 719.

**8/02/2022** - Bars and restaurants can reopen at 100% of their capacity in Quebec.

**03/03/2022** - On March 3, Dr. Kieran Moore, Ontario's Chief Medical Officer of Health, said the actual number of COVID-19 cases in the province is likely ten times the reported figure based on limited testing.

**12/03/2022** - Quebec lifts several health measures including vaccine passport

**21/03/2022** - On March 21, Ontario drops its mask mandate for schools, restaurants, bars, gyms, and several other public settings.

**11/05/2022** - On May 11, Ontario reports a total of 13,000 deaths.

**01/10/2022** - COVID-19 border measures end.