

A risk-tailored approach to reopening during the COVID-19 pandemic

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A tailored public health approach that accounts for variation in risks across populations, places and time could guide the next phase of Canada's coronavirus disease 2019 (COVID-19) response, argue authors in a commentary in *CMAJ* (*Canadian Medical Association Journal*).

Canada's early response to COVID-19 used a universal approach to containment, with isolation, testing and widespread closures of society, supported by mathematical models based on assumptions of homogeneity in risks.

"There is not one COVID-19 epidemic in Canada but, as with other pathogens, a multitude of microepidemics," writes Dr. Sharmistha Mishra, Unity Health and the University of Toronto, with coauthors. "Risks of acquisition, spread, clinical symptoms and [disease severity](#) are heterogeneous, as are access to and uptake of universal strategies of confinement, testing and isolation."

The COVID-19 pandemic, like others before it, has highlighted inequities and disparities that persist across Canada regarding number of cases, spread and severity within certain populations because of

factors such as age, socioeconomic determinants and geography.

Applying a risk-tailored approach, which has been used in responding to other infectious diseases such as HIV, could help with local containment, anticipate surges at hospitals and the need for critical care beds, and optimize reopening of health and [social services](#) at local levels. It will require more granular data, investigative effort, and a focus on addressing social and health inequities rather than a one-size-fits-all approach to confinement and testing.

"Leveraging heterogeneity as a guiding principle in our COVID-19 response will not be easy and it will not be cheap, but it represents a path forward that affirms [human rights](#) and aligns with aspirations for equity in Canada's health systems," the authors conclude.

More information: *Canadian Medical Association Journal* (2020). DOI: [10.1503/cmaj.201112](https://doi.org/10.1503/cmaj.201112) , www.cmaj.ca/content/early/2020/06/03/cmaj.201112

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