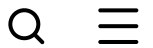




[COVID-19 Updates](#)

- [Alberta entered Stage 3 on July 1](#): Limited restrictions remain.
- [Get vaccinated](#): Everyone 12+ can book first and second doses now.



← [Government of Alberta](#)
[articles](#)

Learning to live with COVID-19

Dr. Deena Hinshaw, Chief Medical Officer of Health in Alberta, provides information about living with COVID.



Posted by
[Dr. Deena Hinshaw](#)

Date
August 4, 2021

Topic
COVID-19

I am sorry that the way I communicated about the planned changes to our COVID-19 response has caused feelings of confusion, fear or anger for some people. I am hearing that the message people received from my words was that I think COVID is over, and that people are being left on their own to deal with it. That was not my intended message, so I want to share some of the rationale behind the changes and why I believe this course of

action will support the whole health of Albertans.

Over the past year and a half we have faced an extraordinary threat together. COVID-19 has required extraordinary measures that have saved lives and prevented our health care system from being overwhelmed. These extraordinary measures were necessary and effective, but they also came with unintended consequences that harmed the health of Albertans in other ways.

I care deeply about the health of all Albertans. This means I have to constantly consider not just COVID-19 but all the other threats to people's health. The majority of our public health resources have been directed at the COVID-19 response, as has been necessary. That has come at the cost of not fully working on other threats, like syphilis and opioid deaths. As vaccine coverage has changed the nature of the province-wide risk of COVID-19, it is time, in my opinion, to shift from provincewide extraordinary measures to more targeted and local measures. This allows us to start looking at other issues while still continuing COVID-19 protective measures in areas of high risk, and responding to local outbreaks where the health system is under threat.

We will not eliminate COVID, which means we need to learn how to live with it. Testing every person with a runny nose or sore throat is an extraordinary measure that we cannot sustain, particularly through the respiratory virus season. Legally mandating everyone to stay home for 10 days if they have any symptoms is also an extraordinary measure. It was necessary before vaccines, but it is also incredibly disruptive; it could only be justified when the risk was unchecked by vaccine protection. I know the vast majority of Albertans do not want to knowingly inflict harm on others. I believe that for those who test positive for COVID-19, knowing that staying home is the way to protect others, and is the right thing to do, will be enough for them to take that action.

When it comes to children, I understand the anxiety about kids under 12 for whom vaccine is not yet available. I have 2 children of my own in that age group, so it is a personal as well as a professional concern. For children, it is important to think about the much smaller risk of severe outcomes and the consequences of the public health measures we have had in place. We know these have led to problems with kids' mental health and impacts on learning and development. We navigate risks for our children every day, and looking at how COVID-19 risks for kids compare with other risks is important to help inform the way forward. For example, for kids 0 to 9, the risk of an ICU admission for seasonal influenza in the year before COVID was roughly equal to their risk of an ICU

admission for COVID. In another example, kids aged 5 to 14 had a 140 times greater risk of an emergency department visit for a sportsrelated injury in 2019 than their risk of COVID-related hospital admission since March of 2020. This doesn't mean we should ignore the risk to kids from any of these things, but I believe it means we should consider COVID risk in context of all other risks that we face.

COVID-19 is a wicked problem; experts don't always agree on the exact nature of the problem, much less the best approach. But it is not the only wicked problem we are facing together. In addressing these complex issues, we are best served by trying to understand each other's perspectives, engaging in respectful dialogue, and continuing to assess our approach. We will be doing just that with the upcoming shifts in our COVID-19 plans. We will be relying on a robust surveillance system including wastewater surveillance, clinical testing, sentinel surveillance in primary care, and outbreak testing to monitor trends and impacts. We will respond to local threats and continue to communicate with Albertans.

I cannot stress enough that vaccines are our most powerful tool in the fight against this virus. While the coverage we have in this province minimizes the threat of overwhelming the health care system, the virus remains a significant risk. Now is the best time to choose to be protected, both for yourself and those around you.

I commit to you that I will continue to do my best every day to serve Albertans, as I have always done, by considering all aspects of the health of all those in Alberta.





Dr. Deena Hinshaw

Dr. Deena Hinshaw was appointed Alberta's Chief Medical Officer of Health on January 28, 2019.

[Learn more →](#)

Was this page helpful?

Yes

No

[Jobs](#)

[Staff directory](#)

[Open Government Program](#)

[Ministries](#)

[Contact us](#)

[Social media directory](#)

[Using Alberta.ca](#)

[Disclaimer](#)

[Privacy](#)

[Accessibility](#)

© 2021 Government of Alberta

