

## Supplementary Table 1: Risk of bias assessment<sup>1</sup>

<b>Item 1: Was the sample frame appropriate to address the target population?</b>	
<b><u>Yes</u></b>	Sample frame described and it approximated the target population
No	Sample frame did not approximate the target population (e.g., blood donors do not represent general population, doctors do not represent all health care providers)
Exclude	Sample frame not described
<b>Item 2: Were study participants recruited in an appropriate way?</b>	
Yes	Probability sampling method (simple or stratified random) or entire sample (e.g., an entire town) was used
<b><u>No</u></b>	Non-probability sampling
Exclude	Sampling method not reported
<b>Item 3: Was the sample size adequate?</b>	
<b><u>Yes</u></b>	≥599
No	<599
Exclude	Sample size not reported
*Notes	<p>To calculate the required sample size we used an assumed prevalence of 2.5%, which was the global average estimated by the WHO in April, 2020.<sup>1</sup> Based on guidance by the Joanna Briggs Institute and published medical statistical recommendations we selected a precision value that was half the assumed prevalence (1.25%) [2,3]. We calculated a minimum sample size of 599 using these inputs:</p> <p>Sample size calculation: <math>n = \frac{Z^2 P(1-P)}{d^2}</math></p> <p>Where n = sample size;  Z = Z statistic for level of confidence (95%);  P = expected prevalence (2.5% WHO global estimate);  d = precision (1.25%)</p> <p>In cases where the sample size calculation was provided and the required sample for 80% power was below our threshold (n&lt;599), this item was marked as yes.</p>
<b>Item 4: Were the study subjects and setting described in detail?</b>	

<sup>1</sup> This assessment uses the Joanna Briggs Institute approach to critical appraisal of prevalence data, as described in Munn Z, Moola S, Lisy K, Riitano D, Tufanaru C. Methodological guidance for systematic reviews of observational epidemiological studies reporting prevalence and cumulative incidence data. *Int J Evid Based Healthc*. 2015 Sep;13(3):147–53. pmid:26317388

Appendix 3, as supplied by the authors. Appendix to: Anand SS, Arnold C, Bangdiwala SI, et al. Seropositivity and risk factors for SARS-CoV-2 infection in a South Asian community in Ontario: a cross-sectional analysis of a prospective cohort study. *CMAJ Open* 2022. doi: 10.9778/cmajo.20220031. Copyright © 2022 The Author(s) or their employer(s). To receive this resource in an accessible format, please contact us at cmajgroup@cmaj.ca.

<u>Yes</u>	Average age and distribution of gender/sex provided
No	Neither age or gender/sex is provided, or only one of age and gender/sex is provided
<b>Item 5: Was data analysis conducted with sufficient coverage of the identified sample?</b>	
<u>Yes</u>	The demographic characteristics (gender/sex, age, and ethnicity) of the sample is at least somewhat representative of the population
No	The demographic characteristics (gender/sex, age, and ethnicity) of the sample is not representative of the population
Unclear	Information is not provided about demographic characteristics of the sample (gender/sex, age, and ethnicity)
<b>Item 6: Were valid methods used for the identification of the condition?</b>	
<u>Yes</u>	The test used met the FDA standards for Emergency Use Authorizations for COVID-19 serological tests: sensitivity minimum 90%, specificity minimum 95%, as reported in the study [4].
No	The test used did not meet the FDA standards for Emergency Use Authorizations for COVID-19 serological tests: sensitivity minimum 90%, specificity minimum 95%.
Exclude	Test sensitivity and specificity not reported
<b>Item 7: Was the condition measured in a standard, reliable way for all participants?</b>	
<u>Yes</u>	The same serology test was used for all participants
No	Different serology tests were used for participants
Unclear	No details were provided about which participants received which serology tests
<b>Item 8: Was there appropriate statistical analysis?</b>	
<u>Yes</u>	Does all of the following: corrects for population characteristics or the sample is somewhat representative of the population (probability sampling), corrects for test characteristics), and provides the information necessary to determine the numerator, denominator, prevalence estimate, and confidence interval.
No	Does not correct for population characteristics and the sample is not likely representative of the population (non-probability sampling), does not correct for test or provide the information necessary to correct for test characteristics, or does not provide the information necessary to determine the numerator, denominator, prevalence estimate, and confidence interval.
<b>Item 9: Was the response rate adequate, and if not, was the low response rate managed appropriately?</b>	

<b><u>Yes</u></b>	Response rate > 60% or the demographics of the sample were a reasonable match to those of the target population [5]
No	Response rate < 60% and the demographics of the sample were not a reasonable match to those of the target population
Unclear	Response rate not provided and it was unclear if the demographics of the sample differed from the target population
<b>Item 10: Overall risk of bias</b>	
Low	The estimates are very likely correct for the target population. To obtain a low risk of bias classification, all criteria must be met or departures from the criteria must be minimal and unlikely to impact on the validity and reliability of the prevalence estimate. These include sample sizes that are just below the threshold when all other criteria are met, reporting only some of characteristics of the sample, test characteristics below the threshold but corrections for the test performance, and response rates that are just below the threshold in the context of probability-based sampling of an appropriate sampling frame with population weighted seroprevalence estimates.
<b><u>Moderate</u></b>	The estimates are likely correct for the target population. To obtain a moderate risk of bias classification, most criteria must be met and departures from the criteria are likely to have only a small impact on the validity and reliability of the prevalence estimates.
High	The estimates are not likely correct for the target population. To obtain a high risk of bias, many criteria must not be met or departures from criteria are likely to have a major impact on the validity and reliability of the prevalence estimates.
Unclear	There was insufficient information to assess the risk of bias.

## Supplementary 2: Demographics in Responders versus Non-responders

		Completed Survey	
	Overall	Yes	No
<b>N</b>		693	223
Female	49.2%	50.2%	46.2%
Age	41.5	40.1	45.7
FSA median household income >=\$80,000	88.3%	88.5%	87.5%
Brampton Resident	82.0%	81.6%	83.3%
Peel Resident	91.7%	91.7%	91.7%
Seroprevalence	23.1%	20.8%	30.5%

Note: Those that did not complete the survey were slightly older, while slightly more females completed. Among the non-completers, the seroprevalence was 10% higher.

**Supplementary Table 3: Demographics by Vaccination# status**

	<b>Pre-vaccination Group</b>	<b>Vaccinated Group</b>	<b>Responses</b>
<b>Overall</b>	458	458	916
<b>Sex</b>			916
Female	234 (51.1)	217 (47.4)	
Male	223 (48.7)	239 (52.2)	
Self-described	1 (0.2)	2 (0.4)	
<b>Age group</b>			906
18-24	54 (11.9)	41 (9.1)	
25-34	162 (35.7)	71 (15.7)	
35-44	154 (33.9)	93 (20.6)	
45-54	55 (12.1)	102 (22.6)	
55-64	22 (4.8)	72 (15.9)	
65+	7 (1.5)	73 (16.2)	
<b>Vaccinated*</b>			916
No	458 (100.0)	0 (0.0)	
Yes	0 (0.0)	458 (100.0)	
1 dose	0 (0.0)	393 (85.8)	
2 doses	0 (0.0)	65 (14.2)	
<b>History of previous COVID-19 infection</b>			699
Yes	47 (13.2)	41 (12.0)	
No	299 (84.0)	301 (87.8)	
Unknown	10 (2.8)	1 (0.3)	
<b>Median Household Income (2015) based on FSA</b>			904
\$40-<\$60K	3 (0.7)	6 (1.3)	
\$60-<\$80K	44 (9.7)	53 (11.8)	
\$80-<\$100K	311 (68.7)	259 (57.4)	
\$100K+	95 (21.0)	133 (29.5)	
Prefer not to answer	0 (0.0)	0 (0.0)	
<b>Essential workers</b>			693
Yes	101 (27.2)	127 (39.4)	

	<b>Pre-vaccination Group</b>	<b>Vaccinated Group</b>	<b>Responses</b>
No	194 (52.3)	158 (49.1)	
Prefer not to answer	76 (20.5)	37 (11.5)	
<b>Completed Education</b>			693
High school or less	68 (18.3)	53 (16.5)	
College, Trade, Certificate	43 (11.6)	46 (14.3)	
University degree	237 (63.9)	216 (67.1)	
Prefer not to answer	23 (6.2)	7 (2.2)	
<b>Multi-generational Household</b>			654
Yes	65 (18.7)	60 (19.6)	
No	234 (67.2)	217 (70.9)	
Prefer not to answer	49 (14.1)	29 (9.5)	
<b>Years in Canada</b>			717
10 years or less	142 (39.4)	81 (22.7)	
>10 years	155 (43.1)	229 (64.1)	
Born in Canada	44 (12.2)	41 (11.5)	
Prefer not to answer	19 (5.3)	6 (1.7)	
<b>Mother tongue*</b>			732
Punjabi or Urdu	190 (52.5)	173 (46.8)	
Hindi	37 (10.2)	46 (12.4)	
Gujarati	44 (12.2)	62 (16.8)	
Other South Asian Languages	85 (23.5)	67 (18.1)	
English	14 (3.9)	40 (10.8)	
Prefer not to answer	4 (1.1)	0 (0.0)	
<b>Medical history</b>			679
CVD (MI/Angioplasty/Stroke)	1 (0.3)	20 (6.3)	
<b>Chronic Medical condition requiring medication</b>			666

	<b>Pre-vaccination Group</b>	<b>Vaccinated Group</b>	<b>Responses</b>
Hypertension	14 (4.0)	34 (10.9)	
Diabetes	14 (4.0)	39 (12.5)	
Arthritis	6 (1.7)	4 (1.3)	
Chronic Lung disease	0 (0.0)	1 (0.3)	
Cancer	0 (0.0)	1 (0.3)	
<b>Smoking Status</b>			641
Never	294 (88.0)	261 (85.0)	
Former	24 (7.2)	29 (9.4)	
Current	16 (4.8)	17 (5.5)	
<b>Location</b>			905
Region of Peel	441 (97.4)	389 (86.1)	
City of Brampton	410 (90.5)	332 (73.5)	
City of Caledon	21 (4.6)	18 (4.0)	
City of Mississauga	10 (2.2)	39 (8.6)	

Presented data are n (%). \*Multiple answers can be selected.

CVD: Cardiovascular Disease

#Vaccinated group includes 393 (85.8%) with a single dose and 65 (14.2%) with two vaccine doses.

**SFigure 1: Consort Diagram**

