

Government's Response to the COVID-19 Pandemic

Written Submission to the House of Commons Standing Committee on Human Resources,
Skills and Social Development and the Status of Persons with Disabilities

Barbra Schlifer Commemorative Clinic

June 15, 2020

Introduction

We are pleased to provide the following recommendations to the Standing Committee on Human Resources, Skills and Social Development and the Status of Persons with Disability, in relation to the Government's Response to the COVID-19 Pandemic.

We would like to thank Parliament for their quick, emergency response to the COVID-19 pandemic, and the efforts that have been made through the COVID-19 Economic Response Plan to support the Canadians left most vulnerable by this global health crisis. Within the women's rights and gender equality sector, the following contributions and funding allocations will benefit those who are suffering, escaping, and surviving gender-based violence, domestic violence, and intimate partner violence:

- \$50 million to shelters and sexual assault centres to assist with women and children who are forced to flee from domestic violence¹
- \$10 million to Indigenous Service Canada for emergency shelters on Reserve and in the Yukon²
- \$40 million allocated to Women and Gender Equality Canada (WAGE),³ with \$30 million of that amount distributed to meet the immediate need of over 500 shelters and sexual assault centres across all provinces and territories⁴
- \$157.5 million to Reaching Home initiative, to support people experiencing homelessness during the COVID-19 pandemic, with funding being used to purchase beds and physical barriers, and securing accommodation for overflow for already crowded shelters⁵
- \$350 million investment by Employment and Social Development Canada (ESDC) called the Emergency Community Support Fund, to support community organizations during COVID-19 who serve vulnerable people in Canada, and whose regular business operations may have been interrupted due to the pandemic⁶

Background on Barbra Schlifer Commemorative Clinic

The Barbra Schlifer Commemorative Clinic ("the Clinic") is the only clinic of its kind in Canada, providing specialized services for women who have experienced violence. The Clinic has extensive experience and expertise serving and representing women who have experienced intimate partner or domestic violence. The Clinic's expertise also includes a vigorous history of advocacy on all issues of violence against women. The Clinic is located in Toronto, and since its founding in 1985, the Clinic has assisted more than 80,000 women who have experienced gender-based violence. In 2019, the Clinic helped more than 9,000 women with their legal, counselling and interpretation needs in more than 200 languages.

Our Clinic is uniquely positioned to provide recommendations that will increase the safety of women and children who have experienced gender-based violence during the current COVID-19 pandemic. Our goal is to provide you with valuable insights as to why COVID-19 has far-reaching, gendered effects. Indeed, the pandemic disproportionately affects racialized, Indigenous and Black women and 2SLGBTQ+ individuals because they are most vulnerable to gender-based violence under lockdown and stay-at-home conditions.

¹ Government of Canada, "Supporting Women's Shelters and Sexual Assault Centres During COVID-19" (last modified 28 May 2020), online: *Status of Women Canada* <<https://cfc-swc.gc.ca/fun-fin/shelters-refuges-en.html>>

² *Ibid.*

³ *Ibid.*

⁴ A complete list, nation wide, may be found here: <https://cfc-swc.gc.ca/fun-fin/shelters-refuges-en.html>

⁵ Government of Canada, "Canada's COVID-19 Economic Response Plan" (last modified 3 June 2020), online: *Canada's Response* <<https://www.canada.ca/en/departement-finance/economic-response-plan.html>>

⁶ Government of Canada, "Emergency Community Support Fund" (last modified 26 May 2020), online: *Benefits* <<https://www.canada.ca/en/services/benefits/emergency-community-support-fund.html>>

By using a feminist, intersectional gender-based approach to policy-making, one that meaningfully addresses violence against diverse women who are disproportionately affected in emergency and lockdown situations, we hope to provide the Government with the necessary information to develop meaningful relief during and after COVID-19. Further, our recommendations will provide the framework needed to facilitate healing in the wake of COVID-19. This includes multi-year core funding to grassroots organizations in the women's rights and gender equality sector to foster long-term sustainability. We believe women should be at the centre of emergency preparedness planning. Partnership and consultation with grassroots women's equity-seeking organizations is essential to ensure that a Gender-Based Analysis Plus (GBA+) lens is applied to both policy and procedures not only in times of crisis but also during the recovery process and beyond.

The Realities of Gender Inequality and The Impact of COVID-19 on Gender-Based Violence

Domestic Violence and Intimate Partner Violence

The current COVID-19 pandemic has further exacerbated and exposed the existence of another deadly pandemic in Canada: domestic violence. In pre-COVID-19 Canada, statistically, every one in six days a woman was killed by her intimate partner.⁷ The rate for attempted murders of women by intimate partners was the equivalent of one in five days,⁸ and “more than 155,000 cases of violence against women in households were reported by police.”⁹

Despite the proactive steps the Government has taken to mitigate the current public health crisis and the respective funding amounts allocated to women's shelters and sexual assault centres, current lockdown measures have exacerbated and worsened the situation of women who are survivors of domestic and gender-based violence during COVID-19.

Stay-At-Home Measures Have Increased Incidents of Domestic Violence and Intimate Partner Violence

Within the COVID-19 pandemic context, one in 10 women who reside in Canada are currently very or extremely worried about violence in the home.¹⁰ However, amid the COVID-19 pandemic, the situation has become even more dire for many women in violent and dangerous living situations. With the stay-at-home emergency orders in place (both at the national, provincial and territorial levels) many women and children have been trapped with their abuser and advised to stay there by the government and public health officials.

Since the outbreak of COVID-19, stay-at-home measures, while necessary for public health and the containment of the contagion, have led to an increase in incidents of domestic abuse and gender-based violence¹¹ while offering no corresponding relief plan for vulnerable women. There has also been an increase in the severity of violent acts that do occur, therefore making them classifiable as high risk. This is attributable to tensions related to health, economic stresses, lost income, and uncertainty surrounding the pandemic, which is compounded by cramped

⁷ Canadian Resource Centre for Victims of Crime, “Every 6 Days a Woman in Canada is Killed by her Intimate Partner. Action is Needed!” (16 October 2015), online: <<https://crcvc.ca/2015/10/16/every-6-days-a-woman-in-canada-is-killed-by-her-intimate-partner-action-is-needed/>>

⁸ Shana Conroy, Marta Burcycka, & Laura Savage, “Family Violence in Canada: A Statistical Profile, 2018” (12 December 2019) online (pdf): *Statistics Canada* <<https://www150.statcan.gc.ca/n1/en/pub/85-002-x/2019001/article/00018-eng.pdf?st=-Jb0eWi3>>

⁹ *Ibid.*

¹⁰ “Canadian Perspectives Survey Series 1: Impacts of COVID-19” (8 April 2020), online (pdf): *Statistics Canada* <<https://www150.statcan.gc.ca/n1/en/daily-quotidien/200408/dq200408c-eng.pdf?st=C9y-lJmv>>

¹¹ “COVID-19 and Ending Violence Against Women and Girls” (2020) at 3, online (pdf): *UN Women* <<https://www.unwomen.org/-/media/headquarters/attachments/sections/library/publications/2020/issue-brief-covid-19-and-ending-violence-against-women-and-girls-en.pdf?la=en&vs=5006>>

living conditions during the quarantine.¹² In short, those already living in an abusive relationship or unsafe home are “facing more extreme violence, and can no longer escape by going to work or seeing friends.”¹³ With fewer opportunities to leave home (even to do grocery shopping), women are less able to seek support or resources or even disclose that they are suffering abuse.

It is essential that the Government amend the message regarding self-isolation and social distancing protocols, so the message is inclusive and mindful of those who are most vulnerable and face domestic violence and intimate partner violence. The message must be: “Stay home if your home is safe, and if not, seek alternate arrangements.”¹⁴ The Government can also continue its support of vulnerable women and those who experience gender-based violence and domestic violence during COVID-19 by funding organizations, like our Clinic, who did not receive direct funding from the Government. We are currently working tirelessly to adapt our service delivery to a social distancing context and develop creative solutions in support of our most vulnerable during COVID-19.

COVID-19 Isolation Decreases Access to Life Saving Resources

COVID-19 has made it more difficult for survivors of domestic violence and intimate partner violence to seek help. Stay-at-home orders have led to an increase in domestic violence while simultaneously and severely hindering access to clinics, shelters, and other organizations that, in turn, struggle to adjust to the disruptions in the delivery of their services. Isolation can lead to the escalation of violence, and many women are now isolated and under the belief that services and resources are no longer accessible or available.¹⁵

Many experiencing violence during COVID-19 are cut off from their usual support systems and may have difficulty accessing the necessary resources to mitigate harm or help keep them safe. Indeed, “[a]s medical facilities around the world scramble to respond to the coronavirus, health systems are becoming overloaded, making it more difficult for victims to get access to medical care or therapists.”¹⁶ This includes lifesaving care that has been disrupted due to COVID-19.¹⁷

Even where services are maintained to help women experiencing violence, “collapse in a coordinated response between different sectors, i.e., health, police and justice and social services response, [due to] social distancing will mean that sectors will be challenged to provide meaningful and relevant support [...]”¹⁸ Our Clinic provides support to vulnerable women and connects them to resources and support networks, as well as counselling, legal, and interpretive services. Immediate and emergency funding from the Government will ensure as little service disruption as possible and provide the support necessary to adapt to current challenges in the delivery of services and resources to those who need it. It will also help us develop new infrastructure and ensure emergency preparedness in the future.

¹² *Ibid.*

¹³ Melissa Godin, “As Cities Around the World Go on Lockdown, Victims of Domestic Violence Look for a Way Out” (18 March 2020), online: *Time* <https://time.com/5803887/coronavirus-domestic-violence-victims/?fbclid=IwAR04Wwz5Q-xRLjPAzFI99mJmoYk5u_ktklO7xbXMIwYOnKEM6uiRUh3719U>

¹⁴ Deepa Mattoo, “Staying Home Often Most Unsafe Place for Women” (5 May 2020), online: *The Star* <<https://www.thestar.com/opinion/contributors/2020/05/05/staying-home-often-most-unsafe-place-for-women.html>>

¹⁵ Perlita Stroh, “COVID-19 Isolation Measures Increase Risk for Those in Abusive Relationships” (29 March 2020), online: *CBC* <<https://www.cbc.ca/news/canada/covid-isolation-risks-abusive-relationships-1.5510551>>

¹⁶ *Supra* at note 13.

¹⁷ *Supra* at note 11 at 4.

¹⁸ *Ibid.*

Decreases in Use of Resources Does Not Mean Violence is Decreasing

Many regions across Canada have seen an increase in official reports of domestic violence. For example, York Regional Police (north of Toronto), saw a significant increase in calls related to domestic violence (22%), ranging in severity from verbal arguments to serious domestic assault.¹⁹ In many regions across Canada, there has been a 20 - 30% increase in rates of gender-based violence,²⁰ and in some places, a 400% increase in calls asking for help.²¹

However, many women, especially Indigenous women and women who belong to racialized minority groups, do not report abuse to the police, mainly due to fear or mistrust in the police and justice system. Indeed, “[v]iolence against women and girls is pervasive but at the same time widely underreported. Less than 40% of women who experience violence report these crimes or seek help of any sort.”²²

Troublingly, many helplines, crisis lines, and shelters have not seen an increase in call volume.²³ In isolation, there is greater potential for escalation and women may not be able to access these supports – either because she is being monitored, or she is confined to space where she cannot speak freely because of her abuser’s close proximity, or the proximity of other family members. This is especially true in rural communities.²⁴ There have been reports that “where movement is restricted, and/or wherever access to quality essential services is limited, or being administered differently, as a result of social distancing (e.g. counselling by phone, emails or other platforms), requests for help have been decreasing.”²⁵

This is especially difficult for many women who face multiple layers of oppression, discrimination, and marginalization. Many “may not have access to a mobile phone, computer, or internet to access services or be able to safely use these at home as they may be closely monitored by the perpetrator or other family members.”²⁶ Many women have suddenly been cut off from their support networks outside of the home, and from valuable resources. This includes “organizations that provide support and recognize abuse (e.g. women’s rights networks, teachers, health workers, faith leaders, community development officers, etc.).”²⁷

Few Options for Women to Leave an Unsafe Situation

Social distancing procedures and limitations placed on shelters make it difficult for women to leave home during these uncertain times. Although overflow spaces, such as beds in hotels, are now being utilized, there is little to no long-term planning or solution.²⁸ Further, women are at the greatest risk of contracting COVID-19 when they seek out alternative housing in shelters. Indeed, “[f]or many women, even the fear of contracting the coronavirus is stopping them from seeking out medical care after experiencing physical abuse.”²⁹

¹⁹ Adrian Humphreys, “Crime in a Time of COVID-19: How the Pandemic is Changing Criminality in our Neighbourhoods” (3 April 2020), online: *National Post* <<https://nationalpost.com/news/crime-in-a-time-of-covid-19-how-the-pandemic-is-changing-criminality-in-our-neighbourhoods>>

²⁰ Raisa Patel, “Minister Says COVID-19 is Empowering Domestic Violence Abusers as Rates Rise in Parts of Canada” (27 April 2020), online: <<https://www.cbc.ca/news/politics/domestic-violence-rates-rising-due-to-covid19-1.5545851>>

²¹ *Ibid.*

²² “Policy Brief: The Impact of COVID-19 on Women” (9 April 2020) at 19, online (pdf): *UN Women* <https://www.un.org/sites/un2.un.org/files/policy_brief_on_covid_impact_on_women_9_apr_2020_updated.pdf>

²³ *Supra* at note 20.

²⁴ *Ibid.*

²⁵ *Supra* at note 11 at 4.

²⁶ *Ibid.*

²⁷ *Ibid.*

²⁸ Alastair Sharp, “A Spike in Domestic Violence Happening in Toronto due to COVID-19 Experts Say” (28 April 2020), online: *Canada’s National Observer* <<https://www.nationalobserver.com/2020/04/28/news/spike-domestic-violence-happening-toronto-due-covid-19-experts-say>>

²⁹ *Supra* at note 13.

Many women face the difficult choice of enduring violence at home, confined with her abuser, or exposing herself to COVID-19 by leaving and finding alternative housing in shelters. There is also the fear that “they can no longer seek refuge at their parents’ home, for fear that they could expose their elderly parents to the virus. For some, travel restrictions may limit their ability to stay with loved ones. Women’s shelters may also be overcrowded during this time or may close their doors if the risk of infection is deemed too high.”³⁰

Economic Barriers to Escape for Vulnerable Women

The economic impact of COVID-19 further exacerbates gender inequality that leaves our most vulnerable women in a position of considerable risk. When COVID-19 hit, women lost employment twice as quickly as men, with the majority of those losses in relation to part-time work, or low-paid service/care work.³¹ Indeed, “[w]omen disproportionately work in insecure, lower-paid, part-time and informal employment, with little or no income security and social protection, such as health insurance – and are therefore less protected from the economic recession in times of crisis.”³²

On a global scale, women comprise “70 percent of the health workforce and are more likely to be frontline health workers, especially nurses, midwives and community health workers.”³³ In Canada, that figure is even higher, with women working on the front lines, a disproportionate share of whom are racialized: 90% are nurses, 75% are respiratory therapists, 80% are medical lab staff, and 90% are Personal Support Workers.³⁴ The global stats also show that “[women] are the majority of health facility service-staff – such as cleaners, laundry, catering.”³⁵ In Canada, more than two-thirds of those who clean hospitals, schools, and office buildings are women.³⁶ However, “despite these numbers, women are often not reflected in national or global decision-making on the response to COVID-19.”³⁷

Money and finances are often an underlying factor in domestic abuse situations: both the abuser’s sole control over it and also an abuser’s anxiety and stress due to lack of income stemming from high unemployment rates. For women who are unable to work, “leaving an abusive partner often involves secretly saving money, which will be more difficult if victims begin to lose their jobs.”³⁸ Many of these women, especially those whose paid work is undocumented for a myriad of reasons, do not qualify for the Emergency Response Benefit (CERB) and are left even more vulnerable in their already precarious situations.

Additional Financial Support Needed to Address Gender-Based Violence and Domestic Violence in Canada Post-COVID-19

The Government has shown its commitment to feminist ideals and policy-making decisions during the COVID-19 crisis. The funding given to women’s shelters and sexual assault centres demonstrates a strong commitment to protecting diverse women across Canada who face inequality, discrimination, and violence. The Emergency Community Support Fund is a great step in the right direction by allowing organizations to apply for grant money. We wish to thank the Government for recognizing the critical work charitable and non-profit organizations do in combatting violence against women.

³⁰ *Ibid.*

³¹ This information is from a letter, written and signed by Katherine Scott et al, which the Clinic endorsed, sent to the Honourable Maryam Monsef, Minister for Women and Gender Equality, Government of Canada, on the 17 April 2020.

³² *Supra* at note 11 at 5.

³³ *Supra* at note 21 at 10.

³⁴ *Supra* at note 30.

³⁵ *Supra* at note 21 at 10.

³⁶ *Supra* at note 30.

³⁷ *Supra* at note 21 at 10.

³⁸ *Supra* at note 13.

We also wish to thank the Government for the \$50 million funding allocation for women's shelters and sexual assault centres. This response could be further strengthened if parallel funding is delivered directly to service organizations that work with those suffering from gender-based violence. Many shelters do not have the ongoing capacity to support women in crisis, and an increase in funding is only a short-term solution. Providing funding to organizations like our Clinic, who facilitate connecting women with a myriad of services, would allow for the development of infrastructure that creates (i) sustainable and long-term solutions and (ii) adaptable systems of resource delivery. This includes advocacy work to ensure information about accessing resources is circulated and advertised effectively during the lockdown, setting up new reporting avenues for women who wish to disclose abuse, and by setting up services such as hotlines for men who experience high anxiety or anger during the quarantine.

Reaching out to community-based organizations for resources, guidance, and support is a crucial, first step many women take before seeking access to shelters or alternative housing when leaving abusive home situations. Targeting such organizations, ones that facilitate the delivery of services/referrals for women escaping violence, would strengthen the sector as a whole. Emergency funding and national resource allocation will allow frontline organizations, such as our Clinic, to develop effective solutions for the many women who remain vulnerable and outside the shelter system during COVID-19.

Emergency funding will help with the expected influx of those seeking resources, clinics, and women's community organizations once the restrictions are lifted. Indeed, "[i]n the aftermath of the crisis, violence against women and girls will continue to escalate, at the same time as unemployment, financial strains and insecurity increase."³⁹ To ensure the sustainability of resources, it is key to invest in the organizations that develop infrastructure and develop alternative delivery systems for services. This will ensure the sector as a whole can handle the influx of those seeking aid and can develop procedures to connect people with the correct services after quarantine restrictions have been lifted.

Sustainable Multi-Year Core Funding for Direct Service Organizations Doing Gender-Based Violence Work in Post-Pandemic Canada

Financially stabilizing the women's rights and gender equality sector is an essential step towards gender equality and the eradication of gender-based violence. What might make the Government's response to gender-based violence even more useful post-pandemic, is to ensure an increase in funding to grassroots women's equity-seeking organizations not only in times of crisis but to make it a priority for every budget, every year.

Canada has the opportunity to become a world leader in the fight against gender-based violence. Global leaders need to rethink their strategies and economic planning to forge new foundations for a better, more equitable society post-pandemic. As Arundhati Roy notes, "[h]istorically, pandemics have forced humans to break with the past and imagine their world anew. This one is no different. It is a portal, a gateway between one world and the next."⁴⁰ Sustainable change for a better world, and a better Canada, means prioritizing our most vulnerable. The Government must provide multi-year core funding for equity-seeking grassroots organizations because they alone are uniquely positioned to create effective infrastructure and supply chains that connect diverse and vulnerable women with lifesaving resources, services, and support networks. Increased, multi-year, sustainable core funding from the Government is financial support that will allow organizations like our Clinic to combat the "shadow pandemic of gender-based violence,"⁴¹ and move into a more enlightened and equitable future.

³⁹ *Supra* at note 11 at 5.

⁴⁰ Arundhati Roy, "The Pandemic is a Portal" (3 April 2020), online: *Financial Times* <<https://www.ft.com/content/10d8f5e8-74eb-11ea-95fe-fcd274e920ca>>

⁴¹ Phumzile Mlambo-Ngcuka, "Violence Against Women and Girls: The Shadow Pandemic" (6 April 2020), online: *UN Women* <<https://www.unwomen.org/en/news/stories/2020/4/statement-ed-phumzile-violence-against-women-during-pandemic>>

Recommendations:

- 1) Fill “[i]mmediate gaps in the emergency funding for the women’s and gender equality sector, in particular those organizations not already receiving funding through the initial injection into the homelessness and gender-based violence response, with a focus on the different needs, such as racialized and Indigenous women, women with disabilities, and 2SLGBTQ+.”⁴²
- 2) Implement multi-year, core sustainable funding for grassroots equity-seeking organizations who work with diverse and vulnerable women because they are uniquely positioned to combat the shadow pandemic of gender-based violence. This means overall “[f]inancial stabilization of the women’s sector that recognizes the existing unique disadvantages that this sector faces, compared to other charities and non-profits.”⁴³
- 3) “Ensure that all government COVID-19 response policies are designed through robust Gender-Based Analysis+ and gender budgeting procedures, considering the needs of those most marginalized by intersecting inequalities.”⁴⁴
- 4) “Processes and funding to engage women’s rights, women’s services and gender equality organizations in an ongoing role in the development of intersectional GBA+ informed responses both during and post-pandemic.”⁴⁵ This should be a long term goal, aimed at sustainability for the sector, and women-centric approaches to future emergency preparedness planning, and the national and local healing processes.
- 5) Application of information and sex-disaggregated data gathering systems that can help track women’s holistic experiences during COVID-19 and lockdown measures. This includes incidents of violence (psychological, emotional, financial, physical) and sexual assault, including the place of occurrence, but not in a way that might further endanger women or subject them to further violence / re-traumatization.

Per:

Deepa Mattoo B.A., L.L.B., MBA, PGDIP

Barrister and Solicitor

Executive Director, Barbra Schlifer Commemorative Clinic

Pamela Rice (she/her), BA (Hons), MA, PGDIP

Manager, Communications, Barbra Schlifer Commemorative Clinic

Kimberley Graham

Law Student, Barbra Schlifer Commemorative Clinic

Barbra Schlifer Commemorative Clinic

503-489 College Street, Toronto, ON, M6G 1A5

T: 416-323-9149 F: 416-323-9107 www.schliferclinic.com

⁴²*Supra* at note 30.

⁴³ *Ibid.*

⁴⁴ *Ibid.*

⁴⁵ *Ibid.*