

RESETTING NORMAL: FUNDING A THRIVING WOMEN'S SECTOR

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RESETTING NORMAL: SYSTEMIC GENDER- BASED VIOLENCE AND THE PANDEMIC

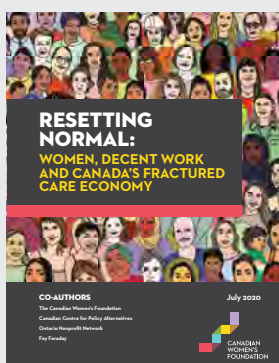
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RESETTING NORMAL: WOMEN, DECENT WORK AND CANADA'S FRACTURED CARE ECONOMY

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RESETTING NORMAL: GENDER, INTERSECTIONALITY AND LEADERSHIP

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RESETTING NORMAL: LESSONS FROM THE PANDEMIC

Building intersectional gender justice in post-pandemic Canada

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INTRODUCTION

As Canada grapples with the COVID-19 pandemic, many want to return to “normal” as quickly as possible.

But “normal” is deeply flawed, especially for women, girls, and Two Spirit, trans, and non-binary people.

The pandemic exposes hard truths.

It’s “normal” that the people getting harmed the most are the people already facing the worst inequities, including women, vulnerable seniors, people living on low incomes, Black, Indigenous, and racialized communities, people with disabilities, people who identify as 2SLGBTQI+, and people who are immigrants, migrants, and/or undocumented.

It’s “normal” for people who experience the worst problems to have the least say in solving them.

It’s “normal” to view equality as “nice to have” – but not an essential feature of a healthy society.

It’s “normal” to give the most vulnerable people in society the lowest priority for care.

It’s time to reset normal.

This report offers three lessons for building intersectional gender justice in as we deal with the impacts of the COVID-19 pandemic.

1. Community care is an essential service.
2. Inequality is harmful to our collective health.
3. Our leadership models are obsolete.

Together, these lessons present a vision that will help Canada recover from the pandemic and ‘shock-proof’ the country against possible future crises, including the coming climate emergency.



LESSON 1: COMMUNITY CARE IS AN ESSENTIAL SERVICE

Before the pandemic, the term ‘essential services’ was generally thought to mean first-responders such as police, firefighters, and emergency room doctors, along with municipal services like garbage collection.

But as the pandemic quickly revealed, keeping people safe and healthy also depends upon long-term care and home care, childcare, and women’s services such as emergency shelters.

These community care services are important to gender justice, since most of the people who need them are women (or parents), as are most of the people who deliver them.

“If you don’t think child and elder care are infrastructure, I doubt you’ve ever needed to take care of anyone in your life.”

- Craig Frizzell @mkefrizz, Twitter, April 8, 2021

History of Neglect

People who rely on community care are among the most vulnerable in our society: frail seniors, people living with disabilities or chronic illnesses, infants and children, and people who experience gender-based violence and sexual assault.

Despite these high needs, community care across Canada has been underfunded for decades. In most provinces, services are a confusing mishmash of public, private, and nonprofit delivery.

Poor working conditions—low pay, heavy workloads, not enough staff, high turnover, no sick time or benefits—make it difficult for staff to provide good quality care. To avoid paying benefits, many employers offer only part-time work, forcing people to work two or three jobs to make ends meet. Most people in these types of precarious jobs have few other choices. For example, many immigrants are highly skilled, but their qualifications aren’t recognized in Canada, making it harder to find work.¹ In a recent York University study, almost all Black Canadians surveyed (96%) said racism is a problem in the workplace.² Systemic issues like these restrict people’s options, making it easier for employers to exploit them with unfair employment practices. Not surprisingly, most community care staff in precarious jobs are women, people from racialized communities, younger workers, newcomers, and undocumented or migrant workers.

“COVID-19 has exposed the cracks of what years of lack of funding has done to the most vulnerable in our communities.”

- SAVIS of Halton

A Fragile System Cracks

LONG TERM CARE & HOME CARE

Multiple outbreaks in long-term care homes across the country shone a spotlight on the systemic gaps: underfunding, inadequate staffing, overcrowding, poor management, and lack of government oversight.

To Canada's shame, seniors in our long-term care homes experienced the highest percentage of pandemic-related deaths in the world: almost 70% compared to the international average of 41%.³ In Ontario and Quebec, the situation became so dire the Canadian military was called in to help, discovering 'horrifying' conditions⁴: many seniors died not from COVID-19 but from simple neglect⁵.

Women who rely on home health care, perhaps due to disability or chronic illness, were also at higher risk of contracting COVID-19 since most home care providers work in multiple households, making them much more likely to become infected.

Allowing vulnerable people to be cared for by workers who are so poorly paid they must work multiple jobs across multiple facilities—with no sick pay—was a disaster waiting to happen.

CHILDCARE

During the pandemic, childcare was recognized as an essential service for frontline workers such as doctors and nurses, but it has always been essential for working parents.

During the pandemic, almost three-quarters (72%) of Canada's 8,700 childcare centres closed and the overwhelmingly female workforce lost their jobs.

Overnight, the responsibility for childcare shifted to parents, usually mothers. Due to pandemic restrictions, their usual sources of emergency



childcare—neighbours, babysitters, and family members—were not an option.

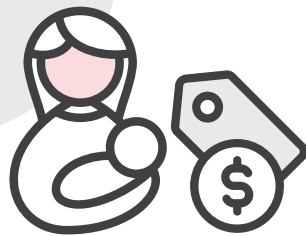
Women's longstanding 'double shift' of paid work and unpaid domestic duties now had a third and fourth shift: childcare and overseeing their children's online learning. Mothers who could work remotely had to juggle their jobs at the same time. Those who couldn't were forced to quit their jobs⁶, losing economic ground that "won't easily be recovered."⁷



54

Number of years since the Royal Commission on the Status of Women called for national childcare legislation¹⁰

\$21,288
Annual cost of infant childcare in Toronto in 2019¹¹






Although most childcare centres have now reopened, compared to pre-pandemic times enrollment is as much as 50% lower¹², mostly because parents can't afford the fees. Even when centres reopen, some childcare workers aren't returning due to the poor working conditions¹³.

There will be no economic recovery without the full participation of women. Accessible, affordable, safe, and high-quality childcare is essential to Canada's economy.

WOMEN'S SERVICES

Women's services include emergency shelters, crisis phone lines, counselling, legal advice, court support, and transitional housing.

During the first pandemic lock-down (March-May 2020), fewer women called crisis lines. Locked down at home with their abuser, they were under constant surveillance and isolated from friends and family. Children were more likely to witness or experience family violence. Women with disabilities were especially vulnerable: if your abuser is also your caregiver, it may be impossible to reach out for help.

			
CHILDCARE WORKERS	97% Women	\$31,711¹⁴	2-year college certificate + 500 hours supervised work¹⁵
TRUCK DRIVERS	97% Men	\$44,832¹⁶	103.5 hours of instruction¹⁷

Every 6 days

Approximately every six days, a woman in Canada is killed by her intimate partner

6x

Indigenous women are killed at six times the rate of non-Indigenous women

3x

Women with disabilities are three times as likely to experience sexual violence as non-disabled women

Once the restrictions lifted, demand for help increased by as much as 30% beyond normal. Widespread job losses were creating severe financial stress, raising the risk of violence. Women were scoring higher on “danger risk assessments,” meaning they were experiencing more severe forms of violence and were at higher risk of being killed.

New Pressures on the Horizon

Major emergencies—such as the 2008 financial crisis—are often used to rationalize austerity measures¹⁸, including funding cuts, deregulation, and privatization.ⁱ

Decades of research shows that privatizing community care leads to substandard care and negative consequences for the highly gendered and racialized workforce. The only way to make a profit is to cut wages, benefits, staff/client ratios, and standards.

When governments withdraw from providing a service—such as long-term care—the responsibility shifts to families, usually women. Those who can afford it turn to the marketplace, causing a downward spiral of economic inequality.

BEFORE PANDEMIC

6,215

Number of women and children sleeping in a shelter each night in Canada because they are not safe at home

DURING PANDEMIC

52%

Percentage of shelters that reported women were experiencing more severe violence during the pandemic

ⁱ Not all public services are subject to austerity. Since the late 1990s, the cost of policing has more than doubled even though crime rates are falling. In 2018, Canadians paid almost [\\$16 billion for policing](#) and another [\\$5 billion for adult correctional services](#).

LESSON 2: INEQUALITY IS HARMFUL TO OUR COLLECTIVE HEALTH

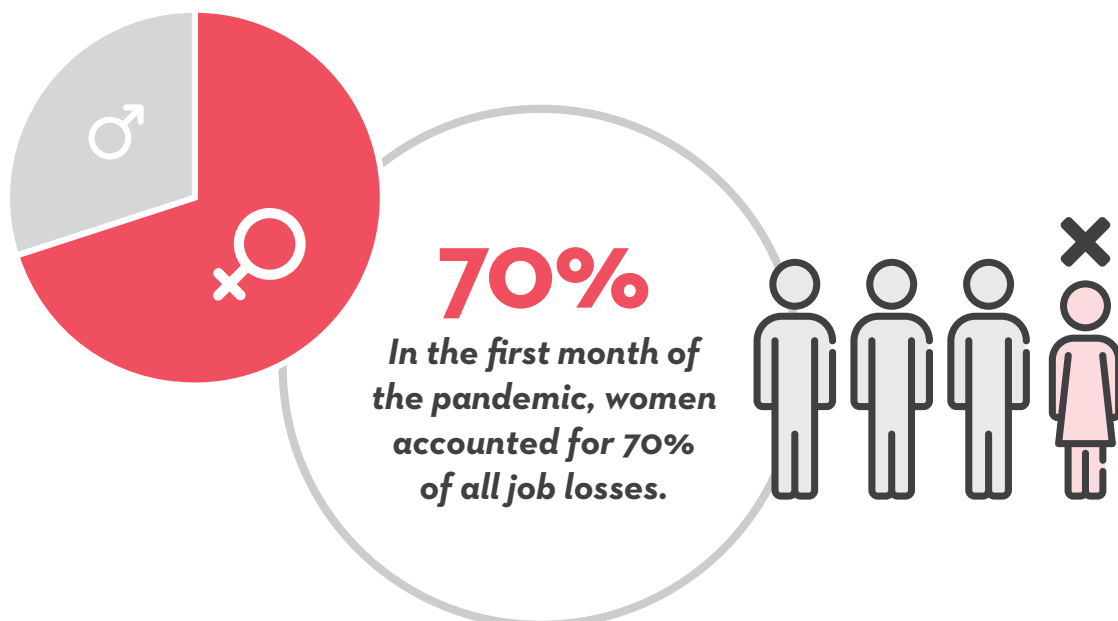
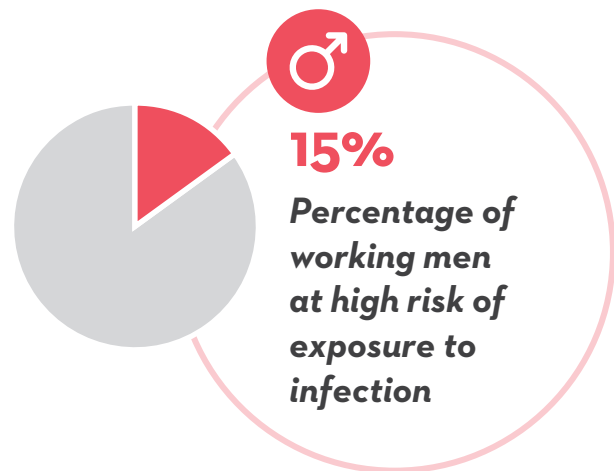
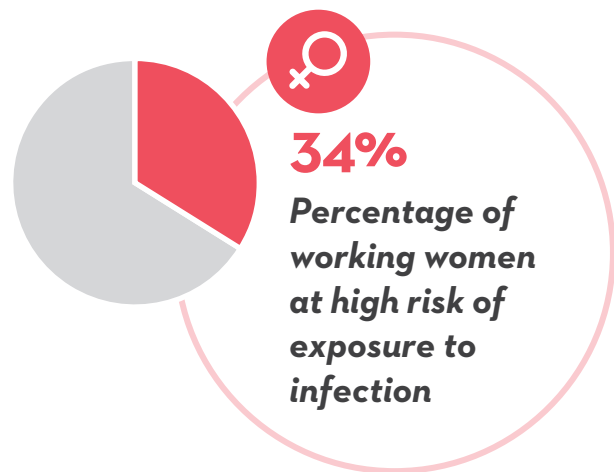
The pandemic has been a harsh reminder of the individual and collective harm caused by inequality.

As in all disasters the most vulnerable people carried the heaviest burden¹⁹, suffered the most profound losses, and will find it hardest to recover.

WOMEN

Throughout the pandemic, women have been much more likely to lose their jobs than men. Women who did continue working were at higher risk than men of being infected on the job, since the vast majority of nurses, personal support workers, lab workers, respiratory therapists, and hospital cleaners are women.

As schools and daycares closed, women were expected to magically pick up the slack—even if they were still working. If they were locked down at home with an abusive partner, they were at much higher risk of violence.



LOW-INCOME, RACIALIZED COMMUNITIES

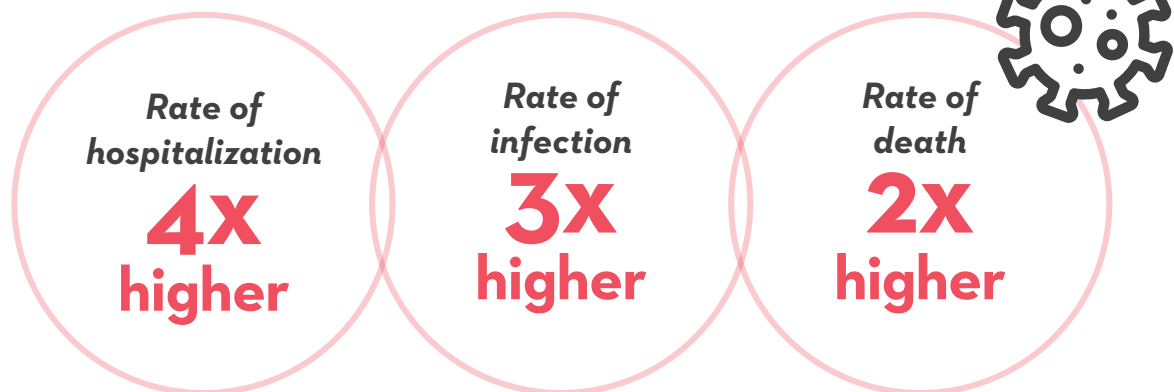
Soon after the pandemic began, it became clear that people living in certain postal codes had higher infection rates due to systemic factors.

They were more likely to work in a low-wage precarious job where social distancing was difficult or poorly enforced, to be an essential worker, and to travel on public transit. They were more likely to live in a multi-generational home, making it harder to socially distance. They were more likely to live with a disability and possibly need visits from a home health care workers. People living on low-incomes are more likely be racialized: due to systemic discrimination, they often have poorer health outcomes²¹.

100%
In 2020, every job lost in Canada due to the pandemic was a low wage job.²⁰

From Individual to Collective Harm

Despite the evidence that the pandemic was causing disproportionate harm to low-income, racialized communities, most governments across Canada stuck to “one size fits all” pandemic strategies. These neighbourhoods were not prioritized for COVID-19 testing or vaccinations, and most governments did not collect race-based data²². Predictably, infection rates in these neighbours soared, extending lockdowns for the entire community and bringing hospitals to the brink of collapse²³.

Risk from COVID-19 in neighbourhoods with highest ethnic diversity²⁴



87%

Percentage of economists who predict income inequality will worsen after the pandemic²⁵

Post-Pandemic, Inequality Predicted to Worsen

According to a new report from CIBC Economics, the income gap during the pandemic widened “at a faster rate that we’ve assumed so far.”²⁶

Many high-income workers were able to reduce their spending, borrow cheap money for real estate and other speculative investments, and even find a better job. In 2020, 350,000 new high-wage jobs were created in Canada²⁷. In contrast, all jobs lost in 2020 were low wage²⁸.

The pandemic also made the existing ‘digital divide’ much worse. Almost overnight, everything from business meetings to school to music concerts to government services to family get-togethers went online. This trend is expected to continue even after the pandemic ends, creating huge pressures for people who can’t afford high-speed internet or a computer or smart phone, seniors who may need help with technology, anyone living in rural and remote areas of Canada with poor connectivity, and people with disabilities who need accessible online services. The challenge is especially difficult for low-income families with multiple people needing to get online at the same time.

The pandemic will also have long-term negative consequences²⁹ to women’s equality. Thanks to a flood of data and analysis—along with insistent advocacy from feminists that Canada is in a “she-cession”—the federal government has acknowledged the pandemic’s disproportionate economic impact on women. To date, federal policy responses have included a long-awaited push for a national childcare system and planning for women and the economy. While this is good news, the pandemic has highlighted the fragility of women’s economic progress and the urgent need for systemic change.

LESSON 3: OUR LEADERSHIP MODELS ARE OBSOLETE

During the pandemic, many commentators noticed that countries with female heads of state seemed to be handling the pandemic better³⁰ than their male counterparts.

This shouldn't have been a surprise: many studies³¹ show diverse leadership results in greater citizen satisfaction. Research consistently shows diversity is also good for business³².

Despite these benefits, women and other marginalized social groups are still vastly underrepresented in leadership positions and elected office. The barriers they face are significant—from stereotyping to outright violence.

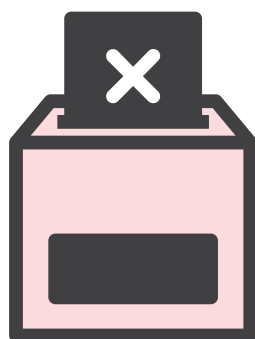
No Voice = No Equality

There is a clear line between lack of representation and social and economic inequality.

Inequality is baked into all of Canada's economic, political, and public systems—including education, criminal justice, policing, healthcare, and social services. These systems were imported and imposed by white, primarily English-speaking, land-owning men from the educated upper-classes. Not surprisingly, they created laws and policies specifically designed to advance their interests and maintain their power.

In 2019 the Viens Commission in Quebec found people from Indigenous communities experienced racism and systemic barriers in virtually every provincial public service—especially women.

Women in elected office in Canada



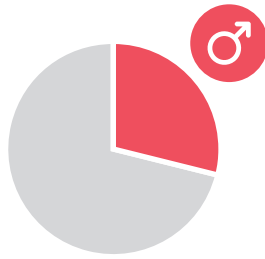
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Number of provincial and territorial governments led by women, out of 13 (as of Sept 2021)

19%
Mayors

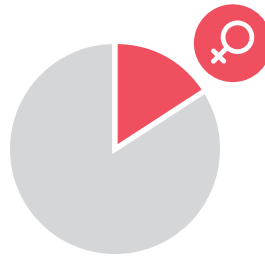
30%
Municipal Councilors

29.6%
Members of federal Parliament



29%

**Percentage of men
who run for political
office in Canada
and win³³**



16%

**Percentage of
women who run for
political office in
Canada and win³⁴**



30+

**Number of years
to achieve gender
parity in Canadian
politics**

But since studies like the Viens Commission are rare, most people continue to believe inequality is somehow the fault of the individual. The systemic causes remain invisible.

**“Until all of us have made it,
none of us have made it.”**

- Rosemary Brown, first Black woman elected to a provincial legislature in Canada

Pandemic Worsens Representation

Experts predict fewer women will run for political office over the next few years.

The pandemic has amplified existing barriers to women’s leadership, such as lack of childcare,

poor work-life balance, and lack of income. Online misogyny, racism, religious hatred, and gender-based violence were already major deterrents for women, racialized, and gender-diverse candidates—now the shift from door-to-door canvassing to digital campaigning has greatly increased the risk. There is an increase in hate crimes against women, racialized groups, and religious minorities.

Between 2020 and 2022, municipal elections will be held in all jurisdictions across Canada. Given pandemic-related challenges, the number of new candidates is expected to decrease, especially among women. This may lead to vacancies on local councils, which would be bad for democracy, or the routine re-election of incumbents, which would continue the status quo.

Even when women are nominated to run for elected office, it’s likely to be in a riding their party is unlikely to win³⁵.

Rethinking Leadership

Over the last few decades, leadership roles in most public and private institutions have slowly expanded to include small numbers of women and other previously excluded groups.

But despite reforms, good intentions, and ‘public consultations,’ these systems still operate in much the same paternalistic way.

While adding diverse voices to institutions is important, it won’t necessarily lead to systemic change. Without a new mindset—a new vision of inclusive and transformational leadership³⁶—our political, economic, and social systems will continue to replicate inequality.

Inclusive leadership³⁷ is based not on traditional patriarchal hierarchies, but on networks and collaboration. In this model, consultation isn’t good enough—decision-making power must be shared. Inclusive leaders understand that the best solutions don’t come from the people at the top, but from the people closest to the problems.

Building intersectional gender justice is vital to address the leadership gaps that continue to replicate historic inequality. All voices must be heard. Decision-making processes—and the resulting decisions—must address the full reality of women’s experiences. One-size never fit all.

For example, a government service that is not fully accessible perpetuates systemic inequality for people living with disabilities. A self-employment program that doesn’t offer options for affordable childcare effectively excludes women who care for young children. A strategy to build women’s leadership that doesn’t explicitly address the barrier of racism, replicates racism.

Systemic discrimination will never be addressed until those who experience the discrimination hold power in decision-making processes.

“Leadership is a series of behaviours rather than a role for heroes.”

- Margaret Wheatley, social scientist, educator, author



CONCLUSION

The pandemic has proven that ‘normal’ is deeply flawed.

After decades of cutbacks and the worst public health crisis in over one hundred years, Canada’s social safety net—including services like long-term care—has been dangerously weakened. When the full cost of the pandemic is assessed, governments may come under pressure to cut spending. But allowing the continued destabilization of community care would harm the most vulnerable, be disastrous for women’s equality, and endanger the health and safety of the entire community.

‘Resetting normal’ means ensuring a well-funded system of community care.

The pandemic had a disproportionate impact on the health and financial security of people who already experience the deepest inequality, including women, vulnerable seniors, people living on low incomes, people from Black, Indigenous, and racialized communities, people living with disabilities or who are Deaf, people who identify as 2SLGBTQI+, and people who are immigrants, migrant and/or undocumented workers.

Economists are already predicting that economic inequality will worsen in the coming years. For women, all the economic progress made over the last fifty years is now at risk.

‘Resetting normal’ means taking steps to address historic inequality because social and economic equality is not only the right thing to do—it benefits everyone.

The pandemic placed political leadership in the spotlight. People saw how government decisions affected their daily lives. Who decided what was an essential service? Who received financial aid? Whose needs were given priority?

Post-pandemic planning is already underway, but the people who were most harmed are still not being heard. In fact, it’s getting even harder to women and marginalized groups to take on leadership.

‘Resetting normal’ means listening to people who are not usually heard, wherever community decisions are being made. It means developing clear strategies for inclusive and transformational leadership—the only road to systemic change and true equality.

The old ‘normal’ is no longer an option.

Resetting normal is the only way to build intersectional gender justice and shock-proof Canada against possible future pandemics and the coming climate emergency.

The time to reset normal is now.

RECOMMENDATIONS

This section presents specific recommendations for ‘resetting normal’ through government investment and action in post-pandemic Canada.

The recommendations will help build intersectional gender justice by ensuring that:

- Accessible, affordable community care—including long-term care, childcare, or women’s services—is available to anyone who needs it, and that the workers who deliver these services are treated fairly.
- Meaningful action is taken to end systemic discrimination and long-standing historic injustices.
- Governments and organizations move beyond tokenism to ensure women and members of diverse communities have equal opportunities to take on leadership.

‘Resetting normal’ means giving top priority to the people who are most vulnerable. It means equal pay and equitable labour practices are non-negotiable. Gender-based violence and sexual violence are considered public health issues. All community services are accessible to diverse groups and women with disabilities. ‘Resetting normal’ means addressing social and economic inequality by focusing on systemic change, rather than personal factors. It means recognizing that colonialism

continues to harm Indigenous communities, especially women and girls, so that “Truth and Reconciliation” can finally move forward. Regular consultation with women’s organizations and equity-seeking groups is part of everyday governance. Perhaps most importantly, ‘resetting normal’ means understanding the links between community care, inequality, inclusive leadership, and intersectional gender justice.

While these recommendations focus on what government can do, there is also a role for individuals and organizations. For example, people who work in the field of gender-based violence can also support groups that resist state-sanctioned violence, such as Black Lives Matter or the National Centre for Truth and Reconciliation. And we can all learn to better recognize systemic discrimination and to use whatever power and privilege we may have to speak out and challenge it.





RESETTING NORMAL IN COMMUNITY CARE

- Immediately create a **sector stabilization fund** to support the operational costs of non-profit community care and **create more full-time jobs** in the sector that pay a decent wage and offer good working conditions.
- **Increase federal and provincial public funding for long-term care** and related community-based supports for seniors, including **assistance for low-income families** with caregiving costs.
- **Invest in a national system of universal childcare**, including human capital (early childhood educators, cooks, and cleaners) and physical infrastructure (retrofitting existing spaces and building new childcare centres).
- **Reinstate stable core funding for gender-based violence services, sexual assault centres, women-serving agencies, and equity-seeking organizations**, including non-profit organizations and grassroots movements led by and addressing the needs of diverse women.
- Develop social policies that give **priority to public models of care** in long-term care, childcare, and women's services. Over time, **shift all government investments** in community care to **publicly managed, non-profit models**.
- **Introduce federal legislation enshrining Canada's commitment to high quality long-term care and related home care services**, including the principles, conditions, and accountability mechanisms for federal transfer payments.
- **As a prerequisite for receiving federal transfer payments for community care services**, require all provinces and territories to:
 - **conduct gender-based analysis plus** on the impact of these services
 - **create service delivery agreements with non-profit community service organizations**
 - **submit annual reports on the delivery and impact of care services**, in collaboration with stakeholders
- **Develop a national labour force strategy for the community care sector** that recognizes its essential value and the significant skill, effort, and responsibility demonstrated in these jobs, by ensuring decent working conditions including a living wage, paid sick leave, the right to refuse unsafe work and other employment protections, and stable, full-time employment.
- Set, monitor, and enforce **national standards for community care**, based on evidence-based best practices for staffing levels, training, and service management and delivery.
- **For sexual assault services, require all police departments to adopt a 'case review' model** (i.e., the Philadelphia Model) in collaboration with community service organizations, to create better outcomes and ensure the well-being of survivors who report a sexual assault to police.
- Before creating a plan to rebuild community care, **consult broadly and deeply** with care recipients, care workers, unpaid caregivers, community service organizations, and feminist economists. **Lead a meaningful policy discussion** with all stakeholders to **reimagine care** by building a sustainable community care economy that ensures **diverse women receive accessible and appropriate services and workers have decent working conditions**.



RESETTING NORMAL TO ACHIEVE EQUALITY

- Implement the **Calls for Justice of the National Inquiry into Missing and Murdered Indigenous Women and Girls**.
- Implement the **National Action Plan to address violence against Indigenous women, girls, and 2SLGBTQI+ people**, including **equal funding for Indigenous women's shelters** throughout Canada.
- **Co-develop and implement a National Action Plan on Violence Against Women and Gender-Based Violence** that stipulates adequate funding levels, national standards for service provision, and decent working conditions for employees.
- **Conduct gender-based analysis plus** on all government policies to identify barriers to gender equality, **incorporating concepts of intersectionality** to ensure factors beyond gender (such as race) are given equal weight.
- **Establish “access without fear” policies for all government services** to ensure undocumented people can get the help they need without fear of being reported, detained, or deported.
- Invest in **transformative justice initiatives**, including anti-racist approaches that **avoid revictimization and institutional violence** within police, healthcare and social services.
- **Establish police performance measures** based on serving vulnerable populations; include **financial consequences** for poor institutional performance and criminal consequences for institutional perpetrators. Create a **community-led system of police accountability** and oversight based on anti-racist systems transformation. Invest in **educational programs for all police services**, including the RCMP, to clarify **their role in oppressing Indigenous peoples under colonization**, both historically and in ongoing practices.
- Develop an **expedited process** for eligible First Nations women to **register their children** under changes in the Indian Act.
- Invest in **anti-racism and anti-ableism training** programs for community service organizations, led by BIPOC consultants and women with disabilities, to **improve access to services for Black, Indigenous, and disabled women**.
- Improve economic equality by improving access to education, through **increased funding for post-secondary education**, with the long-term goal of **eliminating tuition fees** for all students.



RESETTING NORMAL IN LEADERSHIP

- **Research the links** between the advancement of **gender equality**, the long-term **underfunding of women's organizations**, and the **lack of women's leadership**.
- Invest in **new networks and partnerships** between government, women's organizations, community service organizations, and equity-seeking groups, to **foster the leadership of diverse women** and **identify and address barriers to women's leadership in government**.
- **Collect and analyze data** to learn how to **support a diverse cohort of women leaders** in Canada. **Create leadership resources** and supports such as mentorship and peer-learning.
- Remove systemic barriers to the leadership of diverse women:
 - **Identify and address sexual violence in political institutions and civic spaces** through trauma-informed policies and processes.
 - Develop **parental leave policies** that allow women to participate in governance on an equal playing field.
 - Ensure **adequate remuneration for women leaders** including part-time elected officials, volunteers, and community mobilizers
 - Develop policies to **stop cyber-bullying and harassment** of women in electoral politics.
 - **Promote a culture of respect and civility within government** to enhance safety for women holding elected office.

ENDNOTES

- 1 <https://www.hrreporter.com/focus-areas/recruitment-and-staffing/immigrant-credentials-education-not-being-recognized/324637>
- 2 <https://www.crrf-fcrr.ca/en/component/flexicontent/item/27387-blackness-in-canada-report-reveals-78-per-cent-of-black-people-believe-racism-is-a-severe-problem-in-canada>
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- 15 <https://www.jobbank.gc.ca/marketreport/requirements/5180/ca>
- 16 <https://ca.talent.com/salary?job=truck+driver>
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