Submission to Ms. Dubravka Šimonovic
United Nations Special Rapporteur on Violence Against Women

COVID-19 and the Increase in Domestic Violence Against Women

Living in Fear...
Between Two Pandemics

Submitted by:

Heidi Illingworth
Federal Ombudsman for Victims of Crime, Canada

&

Nadia Ferrara
Executive Director, Office of the Federal Ombudsman for Victims of Crime, Canada

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Introduction

The Office of the Federal Ombudsman for Victims of Crime (OFOVC) is an independent resource at the federal level that provides a voice for victims and survivors of crime in Canada while ensuring the government meets its commitments to victims of crime. An important part of the Office’s work is to identify emerging and systemic issues that negatively affect victims of crime.

Our mandate is to

• assist and inform victims and answer questions about victims’ rights in Canada,
• address and review complaints that fall within our mandate about federal government departments, agencies, laws or policies that affect victims of crime,
• identify and review emerging issues and perform systemic reviews of issues that negatively affect victims of crime,
• provide advice to ensure policy makers are aware of victims’ needs and concerns and make recommendations to federal ministers on how laws, policies and processes can be more responsive to victims’ needs, and
• raise awareness of our work, victims’ issues and victims’ rights at the federal level.

For this submission, it is important to note that we do not represent or speak for the Government of Canada in any way. Our Office is making this submission as an independent stakeholder responsible for identifying emerging issues and providing direct services to survivors of gender-based and domestic violence in Canada.

Over the past 40 years in Canada, a troubling statistic has remained persistently stable: one woman or girl is killed every other day.¹ In 2018, Statistics Canada reported that there were more than 99,000 victims of police-reported, intimate-partner violence among people aged 15 to 89. Women accounted for eight in 10 victims. A total of 18,965 children were victimized by a family member in 2018.² Most incidents occurred in dwellings where the victim and the accused lived together.

Within just 36 days of the pandemic in Canada, violent men killed eight women and one girl.³ We are worried about a surge in intimate-partner and domestic violence in Canada during COVID-19 due to government measures that impose isolation on the population. With no means to escape their abusers, women and children are now more vulnerable to domestic violence, including femicide.

We feel that Canada’s progress toward achieving the Sustainable Development Goals (SDGs) must be accelerated in the context of COVID-19—specifically SDG 5 (achieve gender equality and empower all women and girls) and SDG 16 (promote peaceful and inclusive societies for sustainable development; provide access to justice for all; and build effective, accountable and inclusive institutions at all levels). We believe it is vital to share the information that our Office
has received relating to police intervention in domestic violence during the pandemic. It is equally necessary to share what we know about the limited scope of operations for criminal courts limiting women’s access to justice and about how shelters and services for victims continue to operate during the pandemic.

1. **Extent to which there has been an increase of violence against women, especially domestic violence in the context of the COVID-19 pandemic lockdowns**

Wanda McGinnis, CEO of the Wheatland Crisis Society in rural Alberta, may have expressed it best when she said, “A pandemic doesn’t make [violence] stop. A pandemic just makes that silent.” According to the results of a Statistics Canada survey about the impacts of COVID-19 released in April 2020, one in 10 women are “very or extremely” concerned about the possibility of violence in their home due to the stress of confinement.

Evidence of the gendered impacts of the pandemic in Canada continues to mount. Whether women are at increased risk of violence under lockdown in abusive homes, taking on expanded caregiving responsibilities for children out of school, looking after at-risk vulnerable adults, or making up the majority of workers in on the front lines of health care, social and other service sectors, they are front and centre when it comes to the impacts of and responses to the pandemic.

In Canada overall, the violence rate has risen by 20 to 30 percent. For example, in the province of Ontario, police departments reported a 22% increase in domestic incidents and sexual assault reports. Conversely, in other areas, concerns about social distancing and fears about the virus spreading have resulted in fewer calls to women’s shelters and fewer survivors in shelters. In some cities, there has been a significant drop in calls or fewer requests for help at shelters, sexual assault centres or crisis lines, especially in rural communities. Yet none of this means domestic violence is not occurring.

While most crime is decreasing because people are isolated at home, we know that domestic violence remains present but hidden from sight. Some shelters report increased calls and others experience a drop, which is a red flag. With abusers ever-present, many victims may be unable or afraid to make the call for help. Many shelters are referring to the current period as the “calm before the storm” because they expect to see a massive increase in calls when social restrictions are loosened. Shelters will be even more overwhelmed.

Child welfare agencies have also logged fewer reports of child abuse. This is likely due to fewer witness accounts: school staff make 90 percent of all reports of child abuse—but children have been out of school due to the pandemic.

The recent killing spree in Portapique, Nova Scotia, where 22 victims were shot dead or killed in arson attacks, began with a domestic assault. Misogynistic violence is a national issue—and too
often, a private act of violence leads to a public one. Men with a history of domestic violence and hatred of women have perpetrated a number of mass killings in Canada. Misogyny, violence against women and mass casualty attacks are intimately connected. Ignoring these connections reflects the long-held perception that men’s violence against women they know—particularly against intimate partners—is less serious than violence committed against strangers.9

2. Helplines run by Government and/or civil society available and whether there has been an increase in the number of calls in the context of the COVID-19 pandemic

Canada has 10 provincial and three territorial helplines for assaulted women, survivors and victims of crime, some of which can respond to elder abuse. In Canada’s most populous province, Ontario, there are three helplines: the Assaulted Women’s Helpline (AWHL), a dedicated line for francophone Ontarians (Fem’aide), and a line for Indigenous women (Talk4Healing services, offered in 14 languages). All are available 24/7. Since the pandemic began, the AWHL has been handling four times the number of calls that it normally gets from women seeking shelter, even though it is only getting around five per cent more calls (of all kinds) in total. It normally handles around 4,000 calls a month, with half coming from the city of Toronto.10

Nationally, Indigenous Services Canada, a federal government department, offers a Hope for Wellness Help Line, which provides immediate crisis and counselling support to Indigenous peoples across Canada 24/7 as well as online chatting at www.hopeforwellness.ca. There is also a 24/7 Canadian Human Trafficking Hotline with a chat service. However, there is no national or federal intimate-partner violence or domestic violence support line accessible in all 13 provinces and territories.

Canada has a national helpline for children and youth called the Kids Help Phone. It is run by a civil society organization and offers live chatting and texting in addition to telephone support. Other community-based, civil society organizations have upgraded their services in response to the pandemic by adding live chatting and texting services, such as a coalition of women’s organizations in Ottawa, the nation’s capital. The Unsafe at Home Ottawa secure text and online chat service aims to support women living with domestic violence and abuse during the COVID-19 pandemic. Crime Prevention Ottawa launched the service on April 14, 2020, in collaboration with the Ottawa Coalition to End Violence against Women, Interval House of Ottawa, the Eastern Ottawa Resource Centre, and Victim Services of Ottawa, with communications support from the Ottawa Police Service.

The Unsafe at Home Ottawa secure chat service is available seven days a week from 8:30 a.m. to midnight, and uses safe, encrypted technology to ensure conversations are confidential and secure. Trained counsellors provide advice, referrals and support in English and French. More than 300 women living with violence reached out for support during the service’s first month of
operations. Most calls focused on safety planning or came from friends and family members reaching out for support.\(^{11}\)

Over the past two months, the OFOVC has seen an increase in the number of inquiries from victims/survivors and their families as well as from other stakeholders, such as frontline organizations, victim services and women’s shelters. They have shared troubling stories of what is happening in homes and communities across Canada. It is clear to us that the prolonged isolation is causing tensions to escalate.

Before the pandemic, staff at Victim Services Toronto accompanied police to domestic disturbances, but must now make do with speaking to victims on the telephone. More than 200-trained volunteers have been stood down. The organization is dealing with many cases of tensions escalating into physical violence. In early May, a client was hospitalized after the verbal abuse and controlling behaviour escalated and her partner stabbed her. Weapons are becoming a more common feature of domestic violence cases in the COVID-19 era; Victim Services Toronto now has to arrange three times as many crime scene clean-ups.\(^{12}\)

3. **Women victims of domestic violence being exempted from restrictive measures to stay at home**

Canada has not imposed strict stay-at-home measures. We have had social and physical distancing, with most non-essential businesses and services closed. Women are certainly exempt from restrictive stay-at-home measures if they face domestic violence; however, many may be unsure whether shelters and services for victims are open, available or safe to use during the pandemic.

We know that many women and children are trapped with abusive partners in their own homes: leaving home to seek the safety of a shelter is more challenging than usual now because of the isolation measures. Women’s shelters remain open, but not all provinces and territories have declared them essential services.\(^{13}\) (One exception is the province of Alberta.) As a result, women may be confused about the availability of supports.

In addition, leaders are sending mixed messages. Local, provincial and federal governments have been urging all citizens not to leave home except to acquire needed food or supplies or to perform essential work. This may be a significant reason why calls to shelters and services to help women and children escape violence are down.

Shelters, anti-violence organizations and victim services agencies are trying to get the message out that they are still open and available to help. However, in isolation with their abusers, many victims are unable to reach out for help. For example, they may not have the privacy they need to make phone calls or use computers.
That said, the Ontario Association of Interval and Transition Houses says 20 per cent of the 70 shelters it represents have received an increased number of crisis calls during the pandemic. Calls to Vancouver’s Battered Women’s Support Services jumped 400 percent in the last two months. Some police services are also noticing more domestic violence reports. Thousands of women, girls and transgender and non-binary people face heightened risks of emotional, physical or sexual violence at home under COVID-19 isolation measures.

4. **Availability of shelters and whether there any alternatives to shelters available if they are closed or without sufficient capacity**

Women’s shelters remain open in Canada. However, many were full before the pandemic hit, with support systems operating at maximum capacity. Rates of gender-based violence were also high in Canada before the pandemic. According to the Canadian Femicide Observatory for Justice and Accountability, on average, a woman or girl is killed every other day in Canada. To meet the expected surge in demand and respect physical distancing rules during the pandemic, some cities have been converting university dorms or hotels into shelters. For example, the Calgary Women's Emergency Shelter has partnered with a hotel chain in Calgary to offer shelter for women escaping domestic violence.

In northern, remote or rural communities in Canada, shelters can be inaccessible to many women due to distance: the nearest shelter may be up to 100 km away from an individual’s home. It is harder to access a shelter if it necessitates leaving a community while movement and travel are restricted. There are also steep costs (such as, higher transportation costs) associated with helping those fleeing violence during a pandemic of this scale, some of which may not or cannot be foreseen.

The biggest gaps are in Canada’s North. Small communities are spread across vast territories, leading to vulnerabilities in regards to safety and victimization. Coupled with the lack of access to victim support services, victims of gender-based violence suffer not only from the violence they face, but also from a sense of hopelessness. They may feel abandoned by a victim service system that is failing to support and protect them.

Rural and remote communities across Canada suffer from similar gaps. When the culture of silence that tends to characterize small, familiar communities is combined with a lack of access to shelters and other supports for those affected by gender-based violence, cycles of victimization repeat themselves. To address the needs of northern, rural and remote communities, staffed safe houses are urgently needed in unused government buildings so victims do not face the barrier of having to travel long distances to reach safety.
5. Availability and accessibility of protection orders in the context of the COVID-19 pandemic

With criminal courts largely closed or hearing only urgent matters, protection orders are less available than they once were. Most provincial courts have suspended all but emergency and urgent hearings in response to the coronavirus, and they plan to keep those limitations in place until at least the end of June 2020.

For example, in the province of Alberta, Queen's Bench justices are hearing only family law cases in which there is a risk of violence or immediate harm to one of the parties or a child, or in which there is a risk the child will be removed from the province. Certain child welfare cases meet that threshold, along with reviews of emergency protection orders (EPOs), a type of restraining order that courts can issue in cases of domestic violence. Despite the current court limitations, more EPOs were issued in the first four months of 2020 than during the same period in 2019, according to the provincial justice ministry. Between January and April 2020, Albertans sought 1,110 EPOs, 802 of which were granted. Both numbers were up roughly five per cent year over year.\(^1\)

6. The impacts on women's access to justice, courts operations and the provision of protection and decisions in cases of domestic violence

Currently in Canada, criminal, family and civil court operations have been significantly reduced due to physical distancing measures and other public health and safety requirements.\(^2\) To protect the health and safety of court users and contain the spread of COVID-19, most courts have suspended all regular operations or adjourned matters. Courts have said they will continue to hear only urgent matters during this emergency period.

While businesses and governments are adapting with technology, many courthouses across Canada have old infrastructure; videoconferencing is not always possible. Some courthouses are adapting with teleconferencing for sentencing hearings and urgent matters, which is positive. However, generally, we are not sure how many domestic violence cases are moving forward in the courts right now.

There is a need to continue to prosecute domestic abusers and hold them accountable. Addressing measures surrounding the release of individuals accused of domestic violence is also important and cannot be overlooked during the pandemic. Yet we are hearing that due to the risk of the virus, many peace officers are releasing those accused of domestic violence on bail instead of holding them in remand, pending court. This presents a high risk to the victim’s safety.

In the province of Ontario, criminal and civil jury trials will be on hold for at least an additional three months in light of the ongoing COVID-19 pandemic. The Ontario Superior Court temporarily halted in-person operations in mid-March due to rising concerns over the coronavirus, with all criminal and civil matters suspended or adjourned until June. The Chief
Justice of the court said it would not resume jury selection or jury trials until September 2020 at the earliest. 20

7. The impacts of the current restrictive measures and lockdowns on women’s access to health services. Please specify whether services are closed or suspended, particularly those focusing on reproductive health.

We cannot easily answer this question in regards to reproductive health, as it is outside our scope of work. Most family physicians’ offices remain open by appointment and have removed chairs from their waiting rooms. Many physicians are speaking to their patients via telephone or videoconferencing. Hospitals in Canada have cancelled all non-urgent surgeries, even for cancer and cardiac patients, to prevent the spread of COVID-19 to persons with increased vulnerability.

8. Examples of obstacles encountered to prevent and combat domestic violence during the COVID-19 lockdowns

Across Canada, the availability of services and resources for victims of gender-based and domestic violence differs by jurisdiction, region and community. We believe there is a need to establish national standards to ensure consistent responses across the country, including equitable access to core supports and services that focus on victims' well-being, such as shelters, safe houses and counselling. We also believe there is a need to ensure that the criminal justice system workers are trauma-informed so they can respond appropriately to victims of gender-based violence without causing them further trauma.

The following several pages discuss a number of other obstacles we have identified during the pandemic.

Safety of shelters. A common concern for many in Canada is the safety of women’s shelters. Women may hesitate to access a shelter out of fear of the coronavirus itself. This highlights the need for shelters to have the capacity to establish proper preventive measures. There is evidence that women’s fears and concerns along these lines are not unwarranted: for example, the Native Women’s Shelter of Montreal was forced to close its doors on May 14 after half of the shelter’s staff members and some residents contracted COVID-19. Ten residents, including seven women and three children, were moved to a hotel. The shelter underwent disinfection and is scheduled to reopen in June. 21

Increased operating costs for shelters during this pandemic represent a related and well-documented concern. For maximum safety, shelters need more staff and counsellors, greater technological capacity for online services, more physical space to respect distancing rules, more personal protective equipment, and appropriate screening and sanitation measures.
Given that shelters are an essential service (or should be recognized as such), personal protective equipment for staff should be provided free by governments. However, currently, shelters are responsible for directing a portion of their already-stretched budgets to acquiring this equipment. This takes resources away from helping those in need and tending to regular services.

**Fair wages for front-line workers.** Organizations across Canada have told us they need more money than the federal government has currently pledged. The government has pledged approximately C$3 billion to top up the wages of front-line workers across Canada, while the provinces are contributing an additional C$1 billion. We believe there must be also funding for a shift premium for front-line workers during this crisis, similar to that provided to other essential workers.

Women’s shelters can prevent acts of violence and femicide, yet they have traditionally been under-resourced and underfunded. They face rising costs, declining revenue streams and new obstacles to serving the public. A permanent funding increase should reflect the increased demand and allow shelters to respond to these emerging needs.

Canada spends billions of dollars on police, courts and corrections to respond to violence. Yet only a fraction, in comparison, goes to core funding for women’s shelters and sexual assault centres. Funding eligibility may be an issue: currently, only full-time shelters are eligible for funding. This means many organizations that provide support by working with community partners to find women safe places to stay, are left out of these emergency measures.

**Vulnerable populations.** Evidence indicates that the risk and number of violent incidents against women and children are increasing, especially among Indigenous, racialized, disabled and newcomer women and children and those who identify as lesbian, gay, bisexual, transsexual, transgendered, queer, questioning, or two-spirited (LGBTQ2S). Preliminary data support the idea that the pandemic is hitting marginalized communities harder than others. Moreover, these marginalized groups must cope with considerable structural oppression. Various barriers significantly affect the safety of marginalized women as well as the inequalities they face, which can contribute to violence.

**Children.** A recent study by Sistovaris et al. (2020) notes that children in care are at greater risk of harm, not only from the pandemic, but from physical and emotional maltreatment, gender-based violence, mental health and psychosocial distress, exploitative labour, separation from caregivers and social exclusion. Research shows that system resources and capacity are under considerable pressure as agencies and child protection workers struggle to provide services and supports to clients. Child welfare agencies require child protection strategies that allow for increased coordination across all sectors that involve children in care. They need to build on the strengths and positive coping mechanisms of communities, families, caregivers and children. They need to provide for their clients and thus need required resources and supports to function not just now, but also in pre- and post-pandemic environments.
Indigenous Peoples. Indigenous women in Canada were facing higher levels of violence and abuse than other women in Canada before the pandemic, as highlighted in the National Inquiry into Missing and Murdered Indigenous Women and Girls. The inquiry’s final report revealed that persistent and deliberate human and Indigenous rights violations and abuses are behind Canada’s staggering rates of violence against Indigenous women, girls and LGBTQ2S people.

The COVID-19 pandemic poses a grave health threat to Indigenous peoples in Canada and around the world, and it is exacerbating the social inequities that were already plaguing Indigenous communities. We need to focus our attention on and provide resources to the First Peoples of this country to ensure they have what they need to address the effects of the pandemic. As Anne Nuorgam, Chair of the United Nations Permanent Forum on Indigenous Issues, wrote recently (2020):

“Indigenous communities already experience poor access to healthcare, significantly higher rates of communicable and non-communicable diseases, lack of access to essential services, sanitation, and other key preventive measures, such as clean water, soap, disinfectant, etc. Likewise, most nearby local medical facilities, if and when there are any, are often under-equipped and under-staffed. Even when Indigenous peoples are able to access healthcare services, they can face stigma and discrimination. A key factor is to ensure these services and facilities are provided in indigenous languages, and as appropriate to the specific situation of Indigenous peoples.”

Canada must ensure that services are available and accessible to the Indigenous population. We cannot allow them to fall through the cracks in the system. We agree with Nuorgam (2020) that relevant information about infectious diseases and preventive measures should be made available in Indigenous languages. Communication in one’s own language is a key social determinant of health. Access to timely, culturally appropriate information in formats that are accessible and understood by all is essential to empowering people, especially the most vulnerable, in a global health crisis. In addition, we cannot assume that all persons have access to the internet to obtain such information, especially in the most remote areas of Canada. Information must also be shared through other means, such as radio, television and printed materials.

In Canada, many Indigenous peoples live in multi-generational housing, which amplifies their risk during the pandemic, particularly elders. We need to recognize and honour their resiliency and the way they are using traditional knowledge and practices to deal with the effects of the pandemic. Some First Nations communities in northern Canada are using digital platforms like Zoom or FaceTime so youth can keep in touch with elders and knowledge-keepers to stay connected to their cultural identities. This has been a lifesaver for many young people who are seeking connection during this time of uncertainty.
Indigenous women are three times more likely than their non-Indigenous counterparts to suffer violent victimization.30 Despite comprising just four percent of the Canadian female population, they represent at least 25 percent of female murder victims. In a recent survey of more than 250 Indigenous women, one in five reported having been a victim of physical or psychological violence over the past three months.31 Moreover, many shelters and sexual assault centres in Canada are not run for or by Indigenous peoples, so many Indigenous women will not access them. Even in Canada’s largest city, Toronto, there is not yet a shelter exclusively for Indigenous women.

Overall, it appears that Indigenous women and families have been among the hardest hit with respect to increased domestic violence arising from the forced measures to remain at home. If they leave their homes, they are at the mercy of shelters and agencies whose funding and resources have been reduced.

**Racialized populations.** Racialized women are always at a higher risk of suffering from gender-based violence due to the intersecting structural inequalities they face—and the pandemic is amplifying these inequalities. According to the most recent data, when asked about employment, racialized women most often report working in service industries.32 They generally earn less than their non-racialized counterparts earn and are more likely to be in low-income situations. They also report higher levels of gender-based discrimination. These factors demonstrate that the socio-economic impact of the COVID-19 pandemic on racialized women is severe. We know that in normal times, many women strive to keep funds aside in hopes of leaving abusive partners, but rising levels of unemployment because of the pandemic has made saving money impossible for many, particularly those who are racialized.

This reality underscores the need to take a public health approach to the gender-based violence response, whereby increasing access to health, education and economic participation for the population as a whole can contribute to the safety of all. Financial independence, income security and childcare support are critical issues that affect the safety of women who suffer from violence, but this is particularly so for racialized women. For this reason, nurturing women’s economic empowerment must be at the forefront of such approaches.

**LGBTQ2S community.** LGBTQ2S individuals face elevated rates of domestic violence in Canada, and are more likely than the general population to face financial difficulties and health problems. LGBTQ2S youth have also long reported higher rates of social isolation, bullying and attempted suicide—all factors that are at risk of heightening due to the COVID-19 pandemic. Due to physical distancing measures, many have become disconnected from their support groups and social circles and may be confined to unsupportive households.

Now more than ever, it is critical for members of the LGBTQ2S community to stay connected to one another and to the wider LGBTQ2S support system so they know they can still access safe outlets and a virtual community. However, we know that many LGBTQ2S centres and organizations are struggling to continue their operations, even virtually. These organizations
provide essential crisis services, such as counselling and helping to find alternative housing when an individual’s safety and well-being are at risk. We cannot overlook LGBTQ2S organizations for funding support during the pandemic.

Newcomers. Newcomer women in Canada hold intersecting identities that can cause them to be the object of stereotypes and discrimination and may result in socio-economic marginalization, financial insecurity, isolation, and power imbalances in relationships. These factors can make women who are new to Canada more vulnerable to gender-based violence. For instance, a recent public health analysis of COVID-19 cases in the city of Toronto showed that neighborhoods in the city with the lowest incomes, highest rates of unemployment and highest concentrations of newcomers consistently had twice the number of cases and more than twice the rate of hospital admissions.\(^{33}\)

Overall, in Canada, the COVID-19 pandemic has increased economic marginalization and unemployment. This can be a difficult experience for newcomer families, especially if male members’ identities are tied to their ability to provide for the household. Unemployment has been linked to the use of punitive measures against children, increased alcoholism and violence.\(^ {34}\) As the pandemic leaves more people unemployed and financially stressed, we are likely to see an increase in gender-based violence as men assert their masculinity. Compounding this reality is the fact that newcomer women and families without citizenship status face barriers to accessing information, counselling, community services, medical services and emergency services.

Taking action to alleviate the socio-economic pressures and marginalization faced by newcomers to Canada would serve to facilitate their integration. It would also support and empower women to find opportunities to gain financial independence. As we noted with Indigenous peoples, having access to information in one’s own language is a key social determinant of health. It is important for newcomer women to know they can access community-led, culturally relevant supports without fearing consequences based on their immigration status.

9. **Examples of good practices to prevent and combat violence against women and domestic violence and to combat other gendered impacts of the COVID-19 pandemic by Governments**

The Prime Minister of Canada announced C$50 million in additional funding for shelters and sexual assaults centres during the pandemic to address urgent needs. This money was vital to help shelters build capacity and access the additional resources needed to get women and children to safety and to manage or prevent outbreaks. However, in reality, this has amounted to little in funding per agency:

- Up to C$26 million for 575 women’s shelters (approximately C$45,217 each)
• Up to C$4 million for 193 sexual assault centres (approximately C$20,725 for each rape crisis or transition home)
• C$10 million for Indigenous Services Canada’s network of 46 emergency shelters on reserves and in the Yukon to support Indigenous women and children fleeing violence (approximately C$217,391 per shelter, with exact amounts based on factors like on-reserve population, remoteness and number of beds)

The government also created a C$350 million Emergency Community Support Fund for community organizations providing services to vulnerable Canadians during the COVID-19 pandemic. This money will either go directly to smaller, independent front-line organizations or to larger national groups (such as United Way Canada) that will channel funds to local groups. In addition, the federal government committed C$45 million over five years to build 12 new shelters, which will help protect and support Indigenous women and girls experiencing and fleeing violence. This funding will help build 10 shelters in on-reserve communities across the country, and two in the territories, to support Indigenous women and children.

Although this federal government funding is much needed and appreciated, all other levels of government in Canada—municipal, provincial, territorial and municipal—need to be fully engaged as well. Funding sources from all governments are required to support Canadians’ safety and well-being. For example, the province of Ontario has invested C$40 million to support residential services for children, youth and people with developmental disabilities and emergency shelters for women and families fleeing domestic abuse. Ontario has also dedicated financial support for victims of crime and front-line staff who continue to uphold the administration of justice in response to COVID-19. An emergency payment of more than C$2.7 million has been provided to support services for victims of domestic violence and other violent crimes during the COVID-19 crisis. Ontario is also investing C$1.3 million in technology to help courts and tribunals continue the transition to remote operations.

Women’s shelters, in particular, must be recognized as providing essential services and funded as such, as exemplified by the province of Alberta. Even before the pandemic, shelters—which provide safe housing, the most essential, basic need—were consistently understaffed and under-resourced while operating at full or nearly full capacity. For instance, shelters in the province of Saskatchewan were turning away women and children escaping domestic violence approximately 600 times a month due to lack of resources. Shelters need more financial resources to be as adaptable, flexible and responsive as possible in the face of evolving public health situations.

We have been hearing that many women do not know where to turn or what help is available in their community. When safety is compromised, access to information is critical. We must support shelters and other non-governmental organizations (NGOs) to build capacity for technological resources and digital infrastructure given the massive shift to online services, especially as more counselling is made available online. Greater support for technological
capacity would address this need over the long term. We also recommend the following good practices:

- Establish a national intimate-partner and family violence hotline offering live chat and text messaging supports plus connections to further resources. This would be similar to the Wellness Together Canada Initiative set up by the Public Health Agency of Canada to address increasing mental health concerns.
- Start a national public messaging campaign to reach vulnerable persons as well as men and boys who may be at risk of instigating violence, abuse and coercive control. Such a campaign would not only raise awareness among Canadians about the gendered impacts of the pandemic by shedding light on the realities of domestic violence, but could direct those in need to safety and resources, such as women’s shelters, sexual assault centres and victim services agencies.
- Set up a centralized resource bank and communications space for organizations and individuals to access tools and resources and share best practices and lessons learned. We must leverage technology to provide options for children and youth to safely report instances of neglect and abuse.

10. **Examples of good practices to prevent and combat violence against women and domestic violence and to combat other gendered impacts of the COVID-19 pandemic by NGOs and NHRIs or equality bodies**

**Innovative approaches.** We need innovative ways to help women seek and access supports without alerting their abusers. We have much to learn about this from our European counterparts. For example, the Italian government developed an app to enable victims to ask for help without making a call. In France, women have been encouraged to seek help at pharmacies, which are serving as safe places for them to disclose their need for safety. The French government is also subsidizing hotels so victims can quarantine in safety. The UN Secretary General flagged the idea of setting up emergency warning systems in pharmacies and grocery stores that women can access when they are out on errands. Groups need funds to have the flexibility to be innovative about reaching people, for example through live chatting and texting.

When shelters are crowded, women can still benefit from innovative support groups and advocates. For instance, Samra Zafar, an advocate and survivor of gender-based violence from Toronto, Ontario, offers free weekly webinars where experts provide legal advice and safety planning. Her webinars are referred to as “domestic abuse connection circles.” As a public speaker, Samra advocates for empowerment and inclusion for women, inspiring hope and resilience. This virtual support system is a promising practice that helps inform women of their legal rights, such as how they can obtain a restraining order and stay in their homes.
Another example of a good practice is Uber Canada, which is offering free rides to victims of domestic violence to bring them to a safe place. Women’s agencies are responding in various ways across Canada. There are many positive efforts, but increased funding is still needed for prevention and massive outreach.

In terms of effective prevention measures, we would like to highlight the Ending Violence Association of British Columbia, which offers several prevention programs. A notable one is Be More Than a Bystander, launched in 2011. This involved a ground breaking partnership and public awareness campaign with a professional football team. It featured players talking about violence against women and the importance of respectful relationships. In 2015, this initiative led to the development of the Canadian Football League’s Policy on Violence Against Women, which applies to all national football players, coaches, officials, executives and staff across Canada. The program asks men to take ownership and play an active role in creating positive change. Even more importantly, it highlights how engaging men and boys as allies is critical in preventing gender-based violence.

Another promising practice is the webpage that Western University’s Centre for Research & Education on Violence Against Women & Children recently developed, entitled Resources on Gender-Based Violence and the COVID-19 Pandemic. This evergreen webpage is a centralized hub for resources related to gender-based violence and the COVID-19 pandemic. It contains information about more than a dozen topics, such as family courts, housing and homelessness, technology and remote workplaces, to name a few. It explains how social distancing and the closure of non-essential services have changed the support-seeking landscape and may increase some people’s exposure to violence (e.g., intimate-partner violence, sexual violence, child maltreatment). It shares the work of organizations across Canada as well as key international research.

The OFOVC is also pleased to collaborate with the Canadian Municipal Network on Crime Prevention and its members to create a national framework to help communities create local strategies to prevent violence during pandemics such as COVID-19. We have also been invited to sit on a federal Interdepartmental Committee for Women and Gender Equality to develop a National Action Plan on gender-based violence.

We need to convey the message to all—as public officials in the province of British Columbia did—that their immediate safety is more important than physical distancing or self-isolation. This requires the immediate development and dissemination of public messaging campaigns to reach vulnerable persons and direct them to safety and resources, if needed, such as women’s shelters, sexual assault centres and victim services agencies. It is also important for government to target and reach men who may be at risk of using violence, abuse or coercive control in their relationships.
11. Additional information on the impacts of the COVID-19 crisis on domestic violence against women not covered by the questions above

Canada has not yet widely promoted or funded prevention approaches, practices and programs aimed at reducing or managing domestic violence during the COVID-19 pandemic. We believe more proactive efforts to prevent violence are needed. We must target those at lower levels of risk to prevent tensions at home from escalating to violence. If we share principles, approaches and programs to inform Canadians now, we can stop violence before it occurs in families at lower risk for domestic violence.

There are proven approaches to support behavioural changes that we can share to prevent violence in homes and lessen the pressure on our response systems (e.g., women’s shelters, police and health care services). The OFOVC has called on the Canadian government to immediately deliver prevention information and services virtually through online platforms and/or apps. Some examples that could be promoted widely during the pandemic—providing short- and longer-term solutions—include

- mediation and healthy relationship skills,
- non-abusive conflict resolution strategies, including active listening,
- positive parenting skills,
- ways to reduce male violence, inspired by Stop Now And Plan (SNAP),41 “Becoming a Man” and healthy concepts of masculinity,
- changing beliefs and attitudes toward women and domestic abuse,
- paid advertising campaigns to educate the public about their role in violence intervention and prevention, and
- capacity building and education about the role of informal supports and bystanders.

Governments tend to be more reactive than proactive when it comes to funding programs and services. As a result, funds are usually offered after crises, not beforehand. We need to work on shifting this focus to place prevention squarely in the foreground. Reaching potential perpetrators—who are usually men—is not easy. Some prevention work in Canada has focused on engaging men and boys in conversations around gender equality, gender stereotypes, positive and healthy relationships, and harmful forms of masculinity stemming from patriarchal

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a Stop Now And Plan (SNAP) is an evidence-based, cognitive behavioural, gender-specific model that provides a framework for teaching effective emotional regulation, self-control and problem-solving skills to children who are struggling with behaviour issues (and their parents). The primary goal is to keep children and youth in school and out of trouble by helping them make better choices “in the moment.” Thirty years of rigorous SNAP research has achieved the highest standard of scientific and clinical excellence, with more than 15 years of implementation experience.
social norms. Work with men and boys is an essential preventive measure, and there is growing evidence supporting its effectiveness. \(^{42}\)

**Conclusion.** Gender-based and domestic violence constitute public health issues and violations of women and children’s human rights. In Canada, we need to apply a gender lens to all COVID-19 preparedness, response and recovery efforts, including a strong diversity analysis to ensure no one is left behind.\(^{b,43}\) We must amplify the voices of survivors and groups of women most likely to be victimized, such as Indigenous women and children, women with disabilities, newcomers, refugee women and children, and members of the LGBTQ2S community. A plan to prevent gender-based violence must be intersectional to create meaningful, systemic change that will address the root causes of violence against women and gender-based violence. The plan needs to prioritize victim safety: doing so is paramount to success. We need to work alongside victims because more needs to be done to combat domestic violence. Moreover, we need to fund prevention fully and ensure that funding is sustainable for civil society organizations on the frontlines.

As Canada moves into pandemic response and recovery mode, it is critical to focus on prevention to significantly reduce gender-based and domestic violence. Upstream prevention (that is, before the violence occurs) entails approaches to community safety and well-being that are more than just the absence of crime—they are about deliberately creating a place where everyone has a range of opportunities to grow, learn, work, play, connect, love and be loved. We are at a moment in time where we have an opportunity to take this crisis and ensure, going forward, that the programs we design consider the realities of all Canadians and truly ensure well-being and dignity for all.

\(^{b}\) See the list of key actions to address the gendered dimensions of the COVID-19 crisis developed by Women Deliver in collaboration with Secretary General of the United Nations and the G7 Gender Equality Advisory Council for use by Women Deliver Young Leaders, women’s organizations and the boards of international corporations.
Endnotes


26. Indigenous Peoples in Canada consist of First Nations, Inuit, and Métis. They are distinct and diverse cultural groups and recognized as the First Peoples of Canada.


34. Ibid.


41. “What is SNAP?”, Child Development Institute, https://www.childevelop.ca/programs/snap/what-snap
