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Standing Committee on the Status of Women

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• (1530)

[English]

The Vice-Chair (Ms. Pam Damoff (Oakville North—Burlington, Lib.)): Good afternoon, everyone.

Welcome to the 120th meeting of the Standing Committee on the Status of Women.

This meeting is in public.

Today we will resume our study on the system of shelters and transition houses servicing women and children affected by violence against women and intimate partner violence.

For this, I am pleased to welcome, via video conference, Cynthia Drebot, executive director at North End Women's Centre.

From the South Shore Transition House Association, Harbour House, we have Jennifer Gagnon, executive director.

From the Teermann Society for Abused Women, we have Donna Smith, executive director.

From the Victoria Faulkner Women's Centre, we have Samantha Lacourse, coordinator, A Safe Place.

Thank you all for being here.

I will now turn the floor over to you, Ms. Drebot, for your opening statement. You have seven minutes.

Ms. Cynthia Drebot (Executive Director, North End Women's Centre): Thank you so much for having me.

As introduced, I'm Cynthia, and I'm from North End Women's Centre, which is located in Winnipeg, right in the inner city in the north end. We provide a variety of programs for women to work towards being in charge of their own lives, through a variety of support services. Specifically, I'll talk about shelter and transitional housing with regard to the experience we have, but also some of the challenges and gaps we have seen.

From a shelter perspective, we are not a shelter specifically. We are a women's centre, but we work very closely with shelters. We provide, in terms of capacity, the individual and group counselling that is often needed when it relates to domestic violence. Oftentimes, from a shelter perspective, women will leave the shelter and then have that work to do. Oftentimes, there's a connection back and forth in terms of referral between our centre and shelters.

As well as lots of advocacy and support, there's connecting people to shelter, people who may come to our centre first and talk about domestic violence or intimate partner violence that they're experiencing. They're looking for ways to get into a shelter but they don't really know how to do that. We do those pieces around shelter connection.

As far as transitional housing is concerned, we have 14 transitional housing beds. Six of them are specifically for women who are in addictions recovery and need a place, through their recovery, to live, because they feel that if they were living in their home environment, they would not be successful. We also have eight beds specifically for women who are being sexually exploited or human-trafficked. Women in these transitional housing beds can live with us for anywhere between a year and two years.

As it relates to domestic violence and some of the challenges we've been seeing, I would say that some of our programs are very specific when it comes to whom they may serve. When we talk about transitional housing, I mentioned addictions recovery and sexual exploitation and trafficking. However, the women who come to all of our programs, or a large majority of them, will report domestic violence in their lives, either previously or currently. One of the challenges we've experienced is its prominence. It's spreading across all of our programs. We've been around for 34 years, and in our beginning years, domestic violence was a large portion of what we did solely. The idea of needing to broaden out into different areas of work has allowed us to do different work, but the domestic violence connection is prominent throughout all of our programs.

One challenge we've been experiencing over the last while has been with the increase in poverty and low income, specifically with women involved in domestic violence, specifically racialized women. We're located in the inner city, so we find that many of the women who come to us are living in poverty, with very low incomes. From a domestic violence perspective, they often say to us, "I do not have an option to leave. I do not have a place to stay. I do not have anywhere to go, even if I were to go to a shelter." They often feel they don't have the choice to leave. Income is a huge barrier for them.

We've seen addictions in connection with domestic violence coping for many years, but the increase in meth use is something that we've definitely been seeing over the last while as well. The challenge that comes with this is that many organizations and agencies do not want to work with people when they're under the influence and using, so that becomes a barrier as well. There are also increased mental health challenges.

•(1535)

From the perspective of accessing resources, often a gender lens is not put on the analysis and on the policy development, which creates a challenge in access for women specifically. An example of that might be policies related to homelessness around a housing first policy, and people needing to be homeless for six months.

Women in domestic violence situations and homelessness situations will often couch surf or find a friend or a family member to live with. They will stay in a situation that isn't the best situation but is the situation that they might feel is the best for them at that time or the safest at that time or the only option at that time.

As far as gaps go, I just want to highlight specifically for Winnipeg that we have a few gaps, I would say, related to domestic violence and other areas. We are in desperate need of a 24-7 safe space for women. We do not have a place that is open 24-7 for women to come to where they're in a situation of safety. That can be very broad, but we do not have such a place for women.

When I say women, I'm including trans women. Trans women typically report that they feel unsafe using many of the existing resources that are in place. I would say that from a crisis shelter bed perspective, we are seeing that there is nothing in place for women fleeing exploitation situations. Often the exploitation is a result of domestic violence that has happened in the past, or there can be a connection with partners who are involved in bringing women into exploitation and trafficking.

Transitional housing and affordable housing—

The Vice-Chair (Ms. Pam Damoff): That's actually your seven minutes.

Ms. Cynthia Drebot: Okay. That's no problem. I had a few more things, but that's really great.

The Vice-Chair (Ms. Pam Damoff): If there is something specific that doesn't come up during questions, feel free to provide any information to the committee afterwards.

Ms. Cynthia Drebot: Okay, I will do that.

The Vice-Chair (Ms. Pam Damoff): Thank you.

We'll now turn to the South Shore Transition House Association.

Jennifer, you have seven minutes.

Ms. Jennifer Gagnon (Executive Director, South Shore Transition House Association (Harbour House)): Thank you.

South Shore Transition House Association—or Harbour House—is a 15-bed shelter that covers Lunenburg and Queens counties in Nova Scotia. We provide shelter for women and children, supporting high-risk protocols, emergency protection order application support, crisis and supportive counselling, court and sexual assault exam accompaniment, child and youth counselling, child care, referrals and advocacy. We are in schools doing educational groups. We are speaking and educating in workplaces. We operate through nine satellite locations to offer services in home communities.

Over the past five years, a remarkable increase in access to services has occurred. For example, access to our women's outreach program has increased by 968%, and participation in child and youth

programs in schools by 883%. Overall distress calls have increased by 27%, in-house counselling by 105.3% and outreach counselling by 110.1%. Women are coming to the shelter more often with their children, which shows an increase of 111.45%. What these statistics show is that the community is accessing our programs and services consistently and more frequently.

Through the development of partnerships with community service providers in our jurisdiction, we are trying to minimize the risk associated with increased demand for services with no additional position funding. Our organization consists of long-term employees, team members who have immeasurable knowledge of violence against women. However, the increase in program and service access has made it a continual struggle to provide the services that clients are entitled to receive. We have not had an increase in operational funding since 2015.

After attending the Women's Shelters Canada conference this past spring and reviewing the "Blueprint", it is clear that the trends in accessing shelter services across Canada have increased in all areas, perhaps as a result of movements like #MeToo, but ultimately because people understand gender-based violence differently. It seems that violence against women is being de-normalized.

Shelters are not band-aid solutions to issues of violence against women. Rather, they are part of a larger, system-level component that's essential for supporting women and children in crisis. We provide 24-hour-a-day, 365-days-a-year access to a place that is safe and that helps each woman with her immediate needs. These include health care, safety planning, criminal justice system navigation, trauma-informed supportive counselling for the woman and her children, and linking with a broader system for next steps. Without a safe place to go to escape violence, the level of risk in her situation will certainly increase.

Shelters are an integral component in addressing gender-based violence. Our goal is to eliminate gender-based violence. By doing the things that we do, we are part of the solution. Of course, we have a strong focus on prevention and education, but this is often challenging to embed into our work of direct client service delivery—the clients we support in-house and through our outreach programs are our priority. However, as I detailed previously, our outreach services are reaching more people.

We have been in our community for 31 years. The significant increase in access can also be attributed to an increased understanding that what shelters do works. We engage with people fairly, we understand the impacts of gender-based violence and we provide meaningful contributions, not only to their journey to safety but to the broader system seeking to end gender-based violence.

With regard to existing federal programs and funding, we wrote an application with two local partners to Status of Women Canada. We submitted it in March 2018. To this point, we have not received any communication about whether our project was approved or rejected. We also have concerns with restrictions on how the funding can be used. This is an issue for us. For example, we need more people doing outreach activities, but if the funding guidelines state that the money cannot be used to support existing programs, it fails to address one of the greatest needs we have. People are accessing our programs and we need to build our staffing capacity to meet the demands of our communities.

The Canada Mortgage and Housing Corporation, which is offering the co-investment funding, will give us up to 40% for shelter repairs, renovations or—

• (1540)

The Vice-Chair (Ms. Pam Damoff): Could you slow down just a little bit? The interpreters are having trouble listening and translating at the same time.

Ms. Jennifer Gagnon: Okay, sorry.

The Canada Mortgage and Housing Corporation will give up to 40% for repairs, renovations or new capital investments, but for an organization that barely makes it out of a deficit, creating and finding a 60% contribution becomes basically impossible. Fundraising such a large amount is unachievable in a rural area of Nova Scotia that has high unemployment rates and a large geographical boundary.

With regard to the gap between the beds required and the number of beds, reviewing occupancy rates of shelters can be incredibly misleading. If we have a family in a room with three beds and only two are being used, it skews the occupancy rate. When a family is in-house, no single woman can stay in the same room for privacy, as well as safety, concerns. Also, if there's a woman with significant health concerns, it may be difficult or unsafe for her to be housed in a room with other women. However, it is our policy to try to put several single women in a room together as much as possible.

We do not have second- or third-stage housing, although the demand is most certainly there. If we had second- or third-stage housing, every unit would be filled today. Instead, women are staying in shelters longer, as safe and affordable housing is just not readily available in our jurisdiction. Women have left our shelter to go to substandard housing, such as apartments with no flooring other than plywood or rooming houses that are co-located with men, which is a significant safety issue for women experiencing gender-based violence. These rooms often do not have inside or outside locks, which leaves women unsafe when they are home or when they are in the community.

Single staffing of shelters also creates numerous concerns. The staff is responsible for answering the crisis line, meeting the needs of the in-house clients, letting people in and out, monitoring the overall

house safety, completing intakes and departures, liaising with community partners, and case conferencing—all while trying to do supportive counselling sessions and working to complete safety assessments and plans. Sessions are interrupted, thus creating problems in the continuity of the counselling rapport.

The solutions I propose are as follows:

Address the increased demand for services by reviewing the core funding to shelters.

Fund double staffing in shelters to ensure the continuity of counselling rapport and case planning. This will also lead to shortened stays and will ensure that all the needs of the shelter are met.

Fund shelters to develop and implement both second- and third-stage housing in Canadian jurisdictions.

Review the existing Canadian shelter data and the outcomes of programs and services.

Create clear and time-sensitive communication with regard to funding allotments and project approvals or rejections.

Thank you.

• (1545)

The Vice-Chair (Ms. Pam Damoff): Thank you very much.

We'll now turn to Donna Smith with the Tearmann Society for Abused Women.

You have seven minutes.

Ms. Donna Smith (Executive Director, Tearmann Society for Abused Women): Thank you.

I do appreciate this opportunity to participate in this current study of shelters and transition houses serving women and children affected by violence and intimate partner violence. The Tearmann Society for Abused Women, commonly known as Tearmann House, is a 15-bed shelter providing services similar to our sister shelters across the province, as described by my colleague Jennifer Gagnon of Harbour House.

I would like to note that Tearmann House and Harbour House are members of the Transition House Association of Nova Scotia, which includes seven transition houses, one outreach organization and two healing centres, covering 12 locations throughout Nova Scotia. I will be speaking to the front-line work as it pertains to violence against women and the scope of the study.

Speaking for Tearmann House—and I believe this is common to shelters in Nova Scotia—our occupancy is at near full to full capacity on a consistent basis. Since January of this year, 78 women and 44 children resided at Tearmann, with an occupancy rate of 70%. If a woman is in need of shelter and we are at full capacity, we will offer our living room for the night and work with the woman for options the following morning. Shelters that are at full occupancy often call other shelters closest to them to see if beds are available, and if so, women and their children may agree to transfer to another shelter for a temporary stay. I am aware that in urban areas and some rural areas across the country there are simply not enough beds or shelters to meet the needs of women seeking safety, particularly in our indigenous communities in the north, as Lyda Fuller clearly described in her presentation.

Shelters, whether at full capacity or not, are often single-staffed and are experiencing an increase in the needs of women who are presenting with complex trauma, mental health issues and/or addictions. In our community, the changes to mental health services, for example the closure of a short-stay unit, have resulted in an increase of referrals from the hospital. Transference of trauma treatment from the health care system to community-based organizations, with no additional resources, has created a widening gap for women experiencing trauma and a need for suicide intervention and mental health supports.

Women are triaged, assessed and discharged with a referral to shelters. Shelter staff offer a trauma-informed approach, and meet all women where they are. It is a disservice to women, when they arrive at a shelter and after spending some time with us, to realize we do not have the clinical capacity to provide appropriate treatment or support for the complex trauma they are experiencing. The ability to, at the very least, double staff to contribute to the physical and mental well-being of women and children, in addition to funding for clinical therapists, would contribute effectively to address immediate trauma needs and reduce the long-term impacts of trauma.

The effect of violence on children is manifesting as well, with the presentation of aggression and violent behaviours, and it requires full-time trauma-informed supports. The safety and needs of all children residing in a shelter are the key to healing, but it is an extremely stressful time for both mom and child during their stay. Our child and youth counsellors offer in-house and outreach programs and services to support this. Last year, we had an overwhelming increase of 40% in our child and youth outreach programs, and as resources were stretched, we tried our best to meet the needs of children and youth in the shelter and respond to the needs in the community.

Tearmann was fortunate to receive two years of funding to support a casual child and youth counsellor through our annual letter campaign. We also received funding from the Pictou Mutual Community Foundation, which supports self-esteem programs for girls in rural schools. Additionally, we received funding from the Pictou County United Way to support a house coordinator's position. These options are not always available in every community, and while we are meeting the needs in the short term and temporarily, the temporary and part-time positions are difficult to fill and do not support the hiring and retention of trained staff.

Women and their families can stay at Tearmann House for up to six weeks. Often, depending on available and affordable housing options or other circumstances, they may request an extension. On average, 70% of women departing from Tearmann will be accessing income assistance. The cost of renting an apartment is often \$80 to \$100 more than the rent budgeted by income assistance, resulting in women having to take their excess rent out of their personal allowance amounts.

• (1550)

Women with children may be entitled to the supplement offered through Housing Nova Scotia, and while this offers women the opportunity to rent decent housing, the supplement is not transferable, meaning that a woman who is being stalked by an abusive partner and needs to relocate will lose her supplement.

We are fortunate to be partnering with the local housing authority and the Affordable Housing Association of Nova Scotia, with funding through the homelessness partnering strategy, to manage six second-stage housing units at Brenda Place, which are at full occupancy. Women can reside in these units for up to a year and have access to ongoing programs and support. We know that the most dangerous time for a woman is when she leaves her abusive partner. It is crucial that first-, second- and third-stage options be available and fully funded for women and their families fleeing family and intimate partner violence.

Transition house workers work with women applying for emergency protection orders, peace bonds, family court hearings, and case conferencing with child welfare agencies. Women designated “high risk” based on the Jacquelyn Campbell risk assessment or the ODARA, through the police or RCMP, are requesting support with case conferencing, ensuring their voices are heard and their choices respected as they navigate through processes meant to protect them.

The pressure on women to protect themselves and their children, to leave abusive partners while knowing that their personal safety is more at risk as they do so, to relocate their families, to reside in a shelter or choose to stay in a relationship to manage risk is a burden no woman should have to endure. We all need to work together to address gender-based violence and eliminate violence against women.

My recommendations are that the federal government support provinces and territories with core funding specifically for transition houses and support services for women and their families; include the voices of women's lived experience in this study; and support "A Blueprint for Canada's National Action Plan on Violence Against Women and Girls", presented by Lise Martin of Women's Shelters Canada.

Thank you.

The Vice-Chair (Ms. Pam Damoff): Thank you very much. That was exactly seven minutes. Well done.

We're now going to turn to Samantha Lacourse of the Victoria Faulkner Women's Centre. Welcome.

Ms. Samantha Lacourse (Coordinator, A Safe Place, Victoria Faulkner Women's Centre): Thank you.

Hello, my name is Samantha Lacourse, and I am here as a representative of the Victoria Faulkner Women's Centre in Whitehorse, Yukon.

At the VFWC, I am in charge of running the only low-barrier evening and weekend drop-in program for self-identified women in the entire territory.

The landscape of issues surrounding women affected by violence in the north is very different from that in the rest of Canada. For one, there are limited services available. Also, a number of barriers and gaps in services exist for women in a northern community, the most pervasive of which I will try to touch on now.

On low-barrier services, speaking specifically about Yukon, currently there are three shelters serving women and children affected by violence across the territory. One is in Whitehorse. A second one is in Dawson City, which is located seven hours north of Whitehorse, and a third is in Watson Lake, which is five hours south of Whitehorse. None of these three shelters and transition houses will accommodate women under the influence of a substance. There is no safe option for a woman who uses substances and is affected by violence. This is indicative of a major gap in low-barrier shelters for women across the Yukon.

Regarding long-term support, when the perception of violence is no longer immediately present, the effects of violence remain. We estimate that it can take as many as three to seven years from the definitive end of an abusive relationship for a woman to get back on her feet. Women in Yukon face a pronounced lack of long-term support from organizations narrowly mandated to serve only women facing current threats to safety.

The Victoria Faulkner Women's Centre does its best with limited capacity and funding. It is not a shelter. We provide vital support for women and non-binary people in terms of advocacy, housing, food, prenatal care programming, as well as basic services in our drop-in, such as access to showers, laundry, Internet, phones, fax, long-distance calling, and hygiene products, among many other things.

More needs to be available for women past the perceived end of a threat to safety. The lens of what long-term support looks like must expand beyond the counselling and trauma treatment programs to include programs that give space for women to support and be supported by peers—

•(1555)

The Vice-Chair (Ms. Pam Damoff): Could I get you to slow down when you are speaking?

I know your presentation is quite long, but the interpreters—

Ms. Samantha Lacourse: Thank you. I'll slow down.

The lens of what long-term support looks like must expand beyond the counselling and trauma treatment programs to include programs that give space for women to support and be supported by peers, as well as space to build community as a remedy for isolation. Long-term support includes help with finding housing, tax clinics, employment support, and opportunities for new training and greater education. By broadening the mandate of support to women affected by violence, we can address these gaps and the needs of women past the perceived end of the abusive relationship, because the effects of trauma do not end with the violence.

In terms of capacity for supporting women living with mental health challenges, in Yukon, when an individual accesses a shelter or service due to the presence of violence in their lives and is assessed as having a mental health need, the capacity for those organizations to support them decreases. The more complex the individual's mental health situation is, the more ill-equipped staff are to support them as a victim of violence. Both needs are treated as independent from each other, rather than acknowledging their close intersectionality. This needs to change, and the only way to do so is to build the capacity of the organizations supporting victims of violence, and the people within them.

In terms of confidentiality, compounding the limited services is the social reality of northern communities. Communities in Yukon are small, and therefore an individual's social networks are well connected with others. Confidentiality is a challenge across the board, and conflicts of interest are not always evident, nor do they give favour to the more vulnerable. With only one shelter in Whitehorse, there is no other option if that shelter does not feel safe or if a person is not accepted there.

My recommendations to the committee are the following.

One, increase funding for transportation services in the north, providing lifelines for women in remote communities to get out in times of need.

Two, push for amendments within CRA policy to take into account violence against women. Currently, there is a 90-day waiting period for a person to change their status to single. This 90-day waiting period is a barrier for women to leave an abusive relationship, because many are unable to access social assistance while tied to their partner. Within the Yukon government, a smaller entity, we have advocated for and seen change in their management of applications for social assistance when violence in a relationship is declared. Still, we support many women who are faced with heavier barriers within Indigenous and Northern Affairs Canada. Should both partners in the relationship be accessing social assistance through INAC, a written notice for both parties must currently be provided to change their status to single. This is a problem.

Three, push for low-barrier shelters and create incentive for existing shelters to adopt more harm reduction practices. Again, there is no low-barrier shelter for women affected by violence in Yukon, leaving women who use substances with no safe option.

Four, increase funding for long-term support for women affected by violence. The mandate for violence against women is narrow. Immediate support exists for an individual, yet there is little for women in the years to come.

Five, this issue deserves a more appropriate voice than mine, and frankly more time than I am able to give in this presentation. We cannot talk about improving services affecting indigenous women without acknowledging the colonial mentality that informs these services. More space must be given to traditional ways of living when it is culturally appropriate.

Thank you.

•(1600)

The Vice-Chair (Ms. Pam Damoff): Thank you very much.

Thank you to all of you.

We'll turn to Marc Serré for the first seven-minute round of questions.

[Translation]

Mr. Marc Serré (Nickel Belt, Lib.): Thank you, Madam Chair.

Thank you for your recommendations. They will be a great help to us as we prepare our report.

My first question is for Ms. Gagnon and Ms. Smith.

I am happy you talked about children. We know that women are vulnerable and that a lot of work needs to be done in terms of shelters, but what could we do to help you provide services to children more proactively?

[English]

Ms. Donna Smith: In our centre alone, if we just look at children coming into the shelter who are being affected by violence in their lives, our shelters alone don't specifically have.... I mean, we have our house child and youth counsellor available to support, but we really need services outside of our shelter services that are trauma-informed. Many of the children who come to us are displaying symptoms and behaviours that perhaps fall under the category of ADHD, ADD, or other diagnoses. When you line those up with the effects of violence on children, the behaviours are often directly related to that and not specifically to the other symptoms.

We'd like to see more access to trauma-informed mental health services for children. The sooner we're able to get the services to children following a traumatic event...because studies show that this is the best form of healing. Right now there is a long wait-list for children to get into programs, have assessments done, and get the support they need.

[Translation]

Mr. Marc Serré: Ms. Gagnon, what do you think?

[English]

Ms. Jennifer Gagnon: We have one child and youth outreach worker. Her position is split between getting out in the community, doing girls groups and presentations, and also doing in-house, which greatly limits her time. We've had a major influx of children who are in-house. This is a really significant concern for us. I think a lot of us do really well liaising with mental health and addiction services, but as Donna mentioned, the wait-lists are excruciating. You can get in and have a Choice appointment in Nova Scotia, which will basically look at immediate needs, but it can take you 10 months to get in and see a therapist. It is a significant barrier to the healing and the helping. What we know about trauma is that if you support an individual as soon as you possibly can, you can reduce the long-term impacts.

So that's a very good question. It's something we struggle with on a regular basis. It really comes down to having resources to be able to support them and navigate through the provincial health care system.

Mr. Marc Serré: Madam Gagnon, you mentioned CMHC and the 40%, that with a larger centre, they could maybe get some private sector donations or fundraising. Would you specify a recommendation on that to the committee? As a rural centre, what percentage would you recommend that this be changed to, or increased to, in order to help you out as a rural centre versus an urban centre?

Ms. Jennifer Gagnon: I think 80% would be appropriate. We would be able to fundraise the 20%, for sure.

Mr. Marc Serré: Okay. Thank you.

[Translation]

My next question is for Ms. Lacourse and Ms. Drebot.

•(1605)

[English]

You both talked about addictions. We've heard from other witnesses about the increase, including, I know, in the Northwest Territories and Yukon.

I think there was a comment that you don't even serve someone who has a substance addiction. We've heard from others that it is a larger issue in terms of the clinical stuff. I'm wondering if you have any specific recommendations.

Maybe we can hear from the North End Women's Centre first.

[Translation]

Now we will go to Ms. Lacourse.

[English]

Ms. Cynthia Drebot: Can you clarify for me one more time what you're asking?

Mr. Marc Serré: This is in terms of the addictions part. You mentioned that there was an increase in addiction to meth and so on for the women going to the centre. What can we do by way of recommendations to help you out and to help serve that increase? First, is it an increase, as you mentioned, and what can we do to better support women who have addictions?

Ms. Cynthia Drebot: The piece that seems to be the problem for us is that a lot of organizations aren't prepared to deal with addictions as well. There aren't the supports in place for counselling or for detox. When people are using meth, and in a lot of situations other drugs, a medical detox needs to take place. We're trying to do the trauma piece after, and the supportive piece after, but in a lot of situations, the detox and the medical system pieces aren't in place to be able to support people to get to the piece of dealing with the trauma.

In addiction situations, medical detox needs to be done first. All the stuff that's been medicated for, all that time, is the stuff that can be dealt with after. That's the discrepancy and the challenge that we find.

[Translation]

Mr. Marc Serré: You talked about Indigenous and Northern Affairs Canada. I was frightened by your comment that the department's permission was needed for a separation. That is a good recommendation for change.

If it was possible, I would like the Indian Act to be eliminated. Do you have specific recommendations for us anyway regarding Indigenous and Northern Affairs Canada?

[English]

Ms. Samantha Lacourse: To be honest, I feel I wouldn't do it justice in speaking specifically to the situation with INAC. There are a lot of complex and very evident barriers in terms of the disconnect for individuals who are coming from the Yukon and trying to access services through INAC. It's like navigating a labyrinth of policy, problems, challenges and systems, and I can't....

Mr. Marc Serré: It's huge, yes.

Ms. Samantha Lacourse: Yes.

The Vice-Chair (Ms. Pam Damoff): That's your time. Thank you very much.

We'll now turn to Kellie for seven minutes.

Hon. K. Kellie Leitch (Simcoe—Grey, CPC): Thanks to all of you for taking the time to come and present to our committee. We greatly appreciate it.

I come from a northern community as well. I grew up in Fort McMurray, Alberta, and have worked throughout Yellowknife and other places in the north.

I truly appreciate what you were talking about, Samantha. I was wondering if you could help us as a committee in the report we're formulating by giving us a few more ideas around the CRA and INAC changes you were recommending. I think it's exceptionally important that people recognize that those changes could mean substantive differences for these women. I want to make sure that they're available for our report.

Ms. Samantha Lacourse: Yes, of course.

What I can speak to is that 90-day waiting period and what it means for a woman trying to access social assistance. We have one shelter in Whitehorse. They do their best. They have a 30-day emergency shelter, basically, where you can get a bed and you can stay for 30 days. In that time frame, to be able to provide the

necessary paperwork to have access to social assistance, be it INAC or Yukon government social assistance, in past cases they have needed to provide their previous year's taxes. If they're still attached to their partner and cannot declare that they're single, they basically don't have access to social assistance.

•(1610)

Hon. K. Kellie Leitch: The gap is between the 30 days that you have and the 90 days—

Ms. Samantha Lacourse: It's that gap. There are 60 days there when they—

Hon. K. Kellie Leitch: That 60 days is really what the issue is.

Ms. Samantha Lacourse: Yes, and I have—

Hon. K. Kellie Leitch: I have another question for you. Your organization talks about having a housing navigator.

Ms. Samantha Lacourse: Yes.

Hon. K. Kellie Leitch: Could you explain a bit how that works and how it benefits the women you're helping?

Ms. Samantha Lacourse: Sure. That's a great question. I can really highlight some major issues with that.

There's a 2% vacancy rate in housing in Whitehorse at the moment. It's a crisis. People with money cannot get housing. It creates a real challenge for folks who are on social assistance.

In terms of what we do with housing at the Victoria Faulkner Women's Centre.... There is also FASSY, which is an organization that works with people with fetal alcohol syndrome, as well as the Blood Ties Four Directions Centre, a harm reduction organization, and the Yukon Anti-Poverty Coalition. These organizations come together to form a leeway program, which is essentially a program where we are the landlords. We're the middle people between—

Hon. K. Kellie Leitch: To help provide that affordable housing....

Ms. Samantha Lacourse: Yes. In part, the housing navigator is responsible for that leeway program. It gives time to folks who get their cheques a bit later from INAC and can't keep the housing because it's not the first of the month when they get that cheque. Or if they need support in dealing with landlords, there's a middle person there whom they can speak with, and there's case management attached to that. A housing navigator does that, as well as in general just supporting women to find housing in an already very tight market and advocating for them when it's time.

Hon. K. Kellie Leitch: Donna, I have a question for you. My understanding is that your organization deals a lot with individuals who have disabilities. I'm an orthopaedic surgeon, and I deal with people who have disabilities pretty regularly in my practice, albeit the majority of them are children, particularly those with cerebral palsy.

Can you outline for our committee some of the things that we should be looking to in order to make sure that those specific needs that are quantifiably different are things that the government should be attending to? For individuals who find themselves in crisis and who also have a disability, which adds a more substantive disadvantage in addition to the already challenging situation, what are some of the things that we should be making sure the government deals with in an effective manner?

Ms. Donna Smith: We do have women coming in with disabilities and injuries from their abuse. In our shelter alone, we have a wheelchair-accessible bedroom on our main floor. Last year we had renovations to our kitchen to make it totally accessible so wheelchairs or walkers or even basic supports could get in and around. Most of us are in aging shelters or older buildings, so even to access a cupboard you're bending down in a corner cupboard trying to get the things you need.

Improvements and access to funding around making changes to the actual structure, which we do have access to—

Hon. K. Kellie Leitch: I don't know if all of you want to comment on that accessibility issue.

Obviously, we have an aging population. I'm confident in saying that. I know that in my area just as many elderly women find themselves accessing these services, unfortunately.

Many provinces have accessibility laws and regulations, but are you being supported and able to make those changes?

Ms. Donna Smith: We are supportive in—

Hon. K. Kellie Leitch: I mean, are you being supported to make those changes, financially and otherwise?

Ms. Donna Smith: We are, to a certain degree.

We receive a certain amount of funding to make our kitchen accessible. We still have a large house with our laundry facilities in the basement and the women are not able to access that, so staff have to help them with it.

Funding is limited, and when we bring things up we are supported by Housing Nova Scotia to a degree. There is a whole level of process and there are quotes to get. Sometimes the work involved in making the change is daunting, although we want that change.

Hon. K. Kellie Leitch: Right, the application process....

Ms. Donna Smith: Yes.

Hon. K. Kellie Leitch: In the past, the government had an accessibility fund available to organizations. A subset of that, for shelters potentially, I think would probably be the most appropriate that you can expedite.

• (1615)

Ms. Donna Smith: Absolutely.

The Vice-Chair (Ms. Pam Damoff): You still have 30 seconds.

Hon. K. Kellie Leitch: Does anyone else want to comment on that? Or I can ask another question.

Ms. Samantha Lacourse: Mobility is a challenge, even within our centre and at the shelter in Whitehorse. I can't speak for the shelter in Whitehorse, but it's a communal living situation and it's

several storeys high with an elevator. If you have a mobility challenge and there is an emergency, that would present a problem.

Hon. K. Kellie Leitch: Thank you very much.

Thank you all.

The Vice-Chair (Ms. Pam Damoff): Welcome, Sheila. You have seven minutes.

Ms. Sheila Malcolmson (Nanaimo—Ladysmith, NDP): Thank you very much, Chair.

Before I start, I want to welcome the three women from the Ryerson Women in the House program—Meghan, Sarah and Sarah—our future leaders, I hope. Kudos to Ryerson for getting them right into the work we do.

I have a question for the South Shore Transition House Association. I don't know if we met two summers ago, but a bunch of us were on the south shore and met with someone from your group. I think 10 different organizations were at a round table together. It was really impressive and long-standing work. One of your colleagues said they had been doing this for 29 years and thought they would have worked themselves out of a job by now.

So thank you, to you and all your colleagues at home.

This is a study on domestic violence, shelters and transition houses, and I've been discouraged to hear quite a lot of people testifying at this committee saying that all we need to do is qualify more women for mortgages—some of them \$750,000 mortgages—and build more housing.

That is true, but I want to hear you say that you agree—or that I've heard you and your co-workers clearly—that this is not a fix for the issue of domestic violence, and that the programming that goes with your shelter operations and then your transition operations is a vital part of what happens, especially since the point at which women choose to leave a violent relationship is the time when they're most vulnerable.

Can you give me some evidence to use in our final argument here?

Ms. Jennifer Gagnon: Yes. I can honestly say that trauma is not fixed by a mortgage.

Trauma takes time. Trauma takes care. Trauma takes people who understand. It is not simply taking on a mortgage. It really isn't. We do a lot more to help a woman and her family go through the healing process and get her in a sustainable place where she builds up the confidence that was previously broken.

I think if any efforts are put in from the mortgage side, they should be in investing in our shelters. Our house is exceptionally old. It is not conducive...with disability. We have one accessible room, but we need to have one level so that it's larger. We need access to second-stage housing so that people who need the long-term support of counselling will be able to get the help they need to build that sustainability and inner confidence in themselves. We need third-stage housing because there are large gaps in housing across our community and a lot of unsafe options for housing.

I want them to have a chance to talk as well. But really, ultimately, it's not about an individual person having a mortgage and a home. If she's unable to sustain work or if she has impacts of mental health, really what we need to do is invest in treating that trauma immediately to reduce the long-term effects, so eventually she can get into that mortgage. But that trauma needs to be treated first.

Ms. Sheila Malcolmson: Thank you for being so clear.

I want to ask a related question of the Tearmann Society for Abused Women. My colleague Murray Rankin, who is the MP for Victoria, described the Victoria Sexual Assault Centre having to discontinue its helpline, its crisis line, after decades in service. The #MeToo movement has been lifting the taboo on asking for help. It has been fantastic, but funding has dropped. So they just took themselves out of the business entirely, which is a heartbreaker for our region.

Can you talk about the impacts of the hugely increased demand—quite rightly, increased demand has happened in your group—but also about whether you got the government funding support in order to sustain that demand?

• (1620)

Ms. Donna Smith: In terms of the helpline situation, several years ago—I don't know how long ago now—we, too, lost a local helpline that was in place and was accessed quite a bit. For funding reasons, it was discontinued. The Tearmann Society has the only 24-hour crisis line in our area, and the demand for the crisis line is constant and growing.

We partner with our Pictou County Women's Resource and Sexual Assault Centre on a program called MORPH, which stands for "mapping our road to power and healing", and our crisis line is added to that. That money came from the sexual assault strategy in the province to create supports for women dealing with sexual violence.

We are a part of that support, and although we don't get any additional funding for that—the funding is through the women's centre—we're certainly open. We spoke about the issue of staffing in transition houses. You have one staff member on, primarily, covering the crisis line, the business line and case management of the house, and supporting the residents in the shelter. There's often only one person there. If they're on the crisis line, there may be interruptions from the house, from the doors, whatever.

Funding for additional staff to support the extra work that comes in and the extra support that's necessary to meet the needs of the women in our community is essential. We are finding pieces. At Tearmann House, we're finding funding in small pots to have extra additional staff on, but that's temporary staff. As I said, when we're looking at training and getting more people on board in trauma-informed training opportunities, to retain staff and get well-qualified staff on there.... When staff come on, they are dedicated. Most of our staff have been there for 15-plus years. I've been doing it since 2002. The needs are not decreasing; they are definitely increasing. Funding for additional staff would do a heck of a lot for all the shelters that I speak to.

Ms. Sheila Malcolmson: We've heard this in almost every study that this committee has done. Core operation funding to hire staff and give them continuity of employment, allow them to commit to

the beautiful front-line work you're doing, keep the lights on, and pay the rent—that's what you really need more than anything.

Is that a yes? There are nods from all four witnesses.

Ms. Donna Smith: Absolutely, yes.

Ms. Sheila Malcolmson: Thank you very much.

Thank you, Chair.

The Vice-Chair (Ms. Pam Damoff): Thank you very much.

We'll go to Sonia for our final seven minutes.

Ms. Sonia Sidhu (Brampton South, Lib.): Thank you, Madam Chair. Terry and I are sharing time.

Thank you all for being here and for giving information.

The challenges, as you said, are mobility, accessibility, informed and trained staff, and a lot more funding. These are the challenges you are facing. What kinds of cultural services are you providing? Can you explain those, too? That's to anyone.

Ms. Jennifer Gagnon: We are learning. We have experienced, at Harbour House or South Shore Transition House, several Syrian refugee families that have come in. In our area, we don't have access to halal foods, so I have to send somebody to Halifax to purchase the food, which is very difficult. We don't have translation services. I'll be honest and real, and say that we use Google Translate, which isn't always reliable, at all. We try to access ISANS, that sort of thing, in Halifax. They've been really good to help us, but we are learning. There are a lot of new issues that are coming forward to us. We've asked for help. We want help in being able to understand cultural differences, with refugees in particular.

In Nova Scotia, we have two healing centres that support women from first nation backgrounds. I know they were here today to talk to you about what they do. They have a very different way of looking at healing. They're wonderful.

Yes, this is something that is a large concern, something we need support with to be better at our jobs with women.

• (1625)

Ms. Sonia Sidhu: Thank you.

Donna, you said there's actually wheelchair accessibility, but for blind women or deaf women, do you have integrated services available?

Ms. Donna Smith: In terms of the physical space, we have safety things in the shelter that support those, but those would be a real barrier, if I'm being honest. If somebody who was blind came in, we would offer services, as we do for anyone coming to our shelter. We would reach out to our partners in the community and do our best to support anyone who came to the shelter who presented any sort of disability or need that was outside of what we normally do, absolutely.

Ms. Sonia Sidhu: For Cynthia from Winnipeg, there is a lot of ethnic diversity in the people there. There's a stigma out there. What kinds of services are you providing in Winnipeg?

Ms. Cynthia Drebot: At North End Women's Centre, 70% to 80% of the women who come to our centre are indigenous. In an earlier question, you talked about what kinds of cultural services we're providing. We are hiring people who live in the community, who are from the community, as much as possible. We have women with lived experience who come to the table to be part of program development and adapting and changing.

We have cultural ceremony as part of all of the programs we do across the entire centre—access to elders, access to knowledge keepers. We find that this is the most significant piece that can be done from a trauma-informed perspective, having people discover or connect back to their historical roots and their language. That is the piece we definitely do and see a lot of, and we find it to be instrumental and very important.

Ms. Sonia Sidhu: Thank you.

I'm going to pass it over to Terry Duguid.

Mr. Terry Duguid (Winnipeg South, Lib.): Thank you, Sonia.

Thank you to our presenters for the great presentations and for all the great work they do under very difficult circumstances.

The only presentation I didn't hear was the one from Winnipeg. I'm from Winnipeg, so fortunately I know about the good work that is done by the North End Women's Centre.

My first question is for you, Cynthia, and then I have a question for our Nova Scotia friends.

Our Minister of Social Development made a major announcement today on homelessness, titled "Reaching Home: Canada's Homelessness Strategy". It's \$2.2 billion over 10 years. It sounds like a lot of money.

One of the important things announced this morning was increased flexibility and the importance of tailoring this to individual communities. As you'll recall, the homelessness partnering strategy—the housing first approach—was quite rigid. Not that we're completely jettisoning that.... I'm just wondering about the connection between your programs and homelessness and how this might help you.

The Vice-Chair (Ms. Pam Damoff): You have about a minute.

Ms. Cynthia Drebot: Flexibility will be incredible. One of the biggest barriers we've had has been how homelessness is defined. The connection to a gender-based lens is what we've been asking for. We're really happy if there's going to be more flexibility in how the housing approach will be provided.

Mr. Terry Duguid: How much time do I have left?

The Vice-Chair (Ms. Pam Damoff): You have 45 seconds.

Mr. Terry Duguid: Our Nova Scotia friends talked about prevention and outreach. In the short time we have, could you elaborate on that?

I'm just wondering if you're aware of the work of the Bridges Institute and the efforts to engage men and boys, particularly dealing with abusive men and keeping families together.

Ms. Jennifer Gagnon: Yes, I've definitely heard of it. The proposal we put in to Status of Women Canada was to engage men and boys.

It's a big area. Gender-based violence is not a women-based issue; it's a people issue. We need to start looking and teaching differently.

● (1630)

Mr. Terry Duguid: That's well said. We're on board.

The Vice-Chair (Ms. Pam Damoff): Thank you to all of our witnesses for being here, and to the committee members for their excellent questions.

We're going to suspend for just a minute while we switch the panels. We'll come back for our second panel.

● (1630)

(Pause)

● (1635)

The Vice-Chair (Ms. Pam Damoff): I'm going to call the meeting back to order.

Welcome back to the 120th meeting of the Standing Committee on the Status of Women.

Before we go to our panellists, I will let committee members know that there will be no meeting on November 21. The fall economic statement will be delivered in the House that afternoon, so there won't be a meeting that day.

For the second hour, I'm pleased to welcome the Atira Women's Resource Society and Caithlin Scarpelli, director of communications and fund development. We also have Crossroads for Women Inc., with Geneviève Latour, associate director. We also have Fiona Cunningham, who is a mental health counsellor at Iris Kirby House. Last but certainly not least, from the Vancouver Rape Relief and Women's Shelter, we have Daisy Kler and Jean Fong, who are both transition house workers.

I will now turn the floor over to you, Ms. Scarpelli, for your opening statement. You have seven minutes.

Ms. Caithlin Scarpelli (Director, Communications and Fund Development, Atira Women's Resource Society): Thank you for giving me the opportunity to speak with you today.

Atira Women's Resource Society was incorporated in March 1983, and we opened our first transition house in South Surrey in 1987. Then called the Atira Transition House, its mandate was to support battered women and their children. In keeping with the practice of the time, this meant that women were screened in or screened out, based on a number of onerous screening criteria. For example, if you disclosed that you struggled with substance use or you had a mental health diagnosis, you were turned away. If you lied in order to secure that desperately needed space and you were discovered, you were asked to leave, regardless of the consequence to you.

In September 1992, Janice Abbott came on board as our executive director, and things quickly changed. Based on her lived experience, she understood the deep-rooted relationship between women's experiences of violence and struggles with substance use and mental wellness, and that by excluding these women from receiving services we were causing harm to the very women and children we were meant to support.

Within just a few months, Atira did away with its lengthy screening process and started asking only one question when a person called for space: "Are you fleeing violence?"

Because of this, we were one of the few transition houses, if not the only one, opening their doors to women struggling with substance use and/or mental wellness. We started getting more referrals than we were able to accommodate. The increase in demand was so high that in 1997 we opened a second transition house in Surrey called Shimai, and a second-stage transition house called Koomseh.

From there, we began to expand quickly, and by 2001 we operated the Downtown Eastside's first women-only housing. We now operate more than 23 residential programs for women and their children, including some of Canada's lowest-barrier, women-only housing, as well as a number of innovative non-residential programs, including the world's first—

The Vice-Chair (Ms. Pam Damoff): Excuse me. Could you slow down just a little bit? The interpreters are having trouble hearing and translating. Thank you.

Ms. Caithlin Scarpelli: Sure.

So...including the world's first community-accessible, women-only safe injection room.

Atira now comprises five entities, including two wholly owned for-profit subsidiaries, Atira Property Management and the Painter Sisters painting company, and two related non-profit societies, the Atira Development Society and the Atira women's arts society.

In 25 years, we have become known for our entrepreneurship, risk-taking and innovative programming and housing—for example, Canada's first multi-unit recycled shipping container development, as well as the Maxxine Wright place, a multi-service, multi-part program focused on keeping moms and their kids together.

The projects are often started on shoestring budgets but with amazing partnerships. They are always in response to the needs of the women and children and based on feedback from our staff who identify gaps in services.

We are also known for taking controversial stands, including supporting and upholding the rights of women who do sex work; opening our doors to transgender and gender-queer women and to non-binary individuals who identify as significantly femme; and setting up shared-use spaces in our buildings without the benefit of legal protection.

Our CEO continues to show bold leadership, coming to the table with amazing ways to respond to challenging needs identified by the women and staff, and inspiring us all to take risks and believe that ending all forms of gendered violence is absolutely possible.

I'd like to take you now through some of the things we've learned over our more than 35 years of experience working alongside women and their children.

First, almost all women who have accessed our programs have been, or have children who are currently, in the care of the Ministry of Child and Family Development. Women who have experienced trauma and violence and who are struggling with that trauma are often holding on by a thread. They are surviving, often living in chaos as a result of their circumstances, trying to find safe, affordable housing for their families, and then their children are apprehended. That thread that they are holding on to disappears. This often leads to struggles with substance use, homelessness, street-level sex work and violent relationships with men, and the intergenerational cycle continues.

We need to keep moms and their kids safely together. We need to do this by providing housing that is affordable, providing support services that offer information and supports around life skills, and providing resources and referrals to outreach teams that can support moms once they leave first- and second-stage transitional housing into subsidized or private market housing.

Second, in 2017 Atira housed close to 2,000 women and their children through first- and second-stage transitional housing and through long-term supported housing. Unfortunately, we have had to turn away more than three times as many women and children as we were able to house. This is due to the lack of space.

We need more housing with operational agreements that adequately reflect the needs of our program. This means food budgets for community kitchens to teach life skills and build support networks; repairs and adequate maintenance budgets; and 24-7 staff who allow women to develop relationships and trust to support them through the next steps in their journey.

Third, Atira supports a disproportionate number of first nation, Métis and Inuit women. More than 70% of the women who access our programs in Vancouver's Downtown Eastside and Surrey are women who identify as indigenous. According to the Canadian Women's Foundation, indigenous women are killed at six times the rate of non-indigenous women.

We need culturally appropriate housing for indigenous women and their children, with support services to reconnect them or connect them for the first time with lost culture and healing practices and ceremonies. We need to honour and recognize the continued effects of residential schools and the multi-generational trauma that still happens every day.

I'd like to give you a little example of what that looks like. Recently, a young indigenous woman, aged 19, was brought to our Imouto program by another organization that wasn't able to offer her support. She was tired, scared and incredibly shy. She came to Downtown Eastside to stay with her uncle, who became extremely violent and tried to force her into sex work. When she ran away, she was alone, lost, hungry and she had no money. When she got to Imouto, she wasn't connecting with staff and barely spoke to anyone at all. Staff were finally able to build some trust with her and figured out that she wanted to return home. Neither her band nor her family could or would provide her with the bus ticket she needed to make that journey back. Staff provided arrangements to drive her to a reserve near Keremeos. When they got into her territory, she completely changed, telling stories of her auntie and talking about the mountains and her family. She's still living there and she's thriving.

● (1640)

This program, Imouto, is currently single-staffed, and we are required to raise more than \$160,000 each year from the public to keep its doors open. Without this program, this young woman would likely have been lost to the Downtown Eastside.

Finally, I would like to say that because of years of no increase in funding for housing for women victims of violence, Atira has had to be creative with building new housing and partnering with different levels of government through cash funding, donations of land use and waiving of permit fees. We have also had to—

The Vice-Chair (Ms. Pam Damoff): I've actually let you go over your time.

Ms. Caithlin Scarpelli: Okay. No problem.

The Vice-Chair (Ms. Pam Damoff): Thank you.

We're now going to turn to Geneviève, from Crossroads for Women Inc.

[*Translation*]

Ms. Geneviève Latour (Associate Director, Crossroads for Women inc.): Good morning. My name is Geneviève Latour, and I am the Associate Director of Crossroads for Women inc.

Since 1981, Crossroads for Women has been helping women and their children who are affected by violence against women and intimate partner violence.

Crossroads for Women is the only transition house for victims of family violence and sexual assault in southeastern New Brunswick. We also provide the following bilingual programs and services: a family crisis centre, a sexual assault centre, a toll-free crisis line, more long-term housing, a community outreach program and a youth support program.

Our transition house provides much more than a safe place. We provide vital services and resources that enable women and their children experiencing violence to begin their healing, to rebuild their self-esteem and to take steps to return to a self-sufficient and independent life.

We also raise awareness and contribute to social change as part of broader efforts to prevent and eliminate violence against women and girls.

The transition house has three cribs and 41 beds, three of which are accessible to women and children with reduced mobility. As I just said, we provide much more than housing.

In 2017-2018, we responded to thousands of crisis calls. We provided support to more than 70 individuals who came to the hospital to get medical care in the wake of violence they suffered. We housed 250 women and 90 children.

The federal government really has a leadership role to play in addressing violence against women, and that of course includes the work of transition houses like ours.

I will begin by talking about the discrepancy between the number of beds needed and the number of beds available. It is difficult to gauge that discrepancy. In November 2016, our capacity went from 17 beds to 41 beds. In 2016, our rate of refusal was over 30% and, now, it is just under 20%. The reason there was a drop of only 10% while our capacity increased by 40% is that we are doing more to raise public awareness of this important issue affecting women. Each effort we make to raise awareness leads to more calls.

● (1645)

[*English*]

The Vice-Chair (Ms. Pam Damoff): Can you slow down a bit?

[*Translation*]

Ms. Geneviève Latour: Okay.

Although we have nearly two and a half times more beds than before, our operational income has increased by only 4%. I will talk more about this issue later, but for now, I will come back to the second issue of interest to us—existing federal programs and funding for transition houses.

As you know, the federal government does not provide funding to cover the operating costs of transition houses for women who are victims of violence, with the exception of transition houses on reserve. The majority of federal funding is intended for capital. Managing a transition house is like managing any other house. We must pay bills for public services, insurance, property taxes, food, and so on. All those expenses have increased over the years, but our core funding has only increased very slightly.

Who pays the price of that? Our responders and employees do, and that staff is made up entirely of women. Retaining qualified staff is really a major problem. At the end of the day, women and children fleeing violence pay the price. My recommendation concerning existing federal programs and funding for transition houses has to do with core funding. Ultimately, we cannot do our job effectively if we do not get the funding we need for our operations.

What are the potential solutions? We recommend that, in future legislation, shelters really be recognized as a fundamental human right. Canada needs more safe and affordable shelters for women and children. I also think it is important to keep in mind that transition houses are not “band-aid solutions”. Building more affordable housing without support services for women and children who have fled from violence is not the solution. Those two elements are really necessary. We need more affordable housing, but we also need adequately funded transition houses for women and children fleeing violence.

With adequate funding, transition houses can ensure that all women get immediate access to services. All women have the right to live and enjoy a life free from violence and abuse. Right now, we are abandoning those women if we cannot provide them with services. The only statistic I will emphasize today is the fact that, in Canada, a woman is murdered every six days by someone she knows and is very likely in an intimate relationship with.

It is impossible to cover all the challenges we are facing as a transition house, be it in terms of aboriginal women, the LGBTQ+ community, elderly women, women with disabilities or others. I decided to use my testimony to tell you about the situation of immigrant, refugee and non-status women we accommodate. I am talking to you about this to point out that core funding and the provision of specialized programs are important for transition houses.

In our house, Crossroads for Women, there are always on average three immigrant or refugee women and three children. Those women and children are facing specific barriers not known to non-immigrant women. For example, the average stay in our house is about 28 days for Canadian women, while it is 74 days for immigrant women and families. Some of the things those women are dealing with are language barriers, difficulties navigating in various systems, cost of services, the length of the process to obtain a status—which impedes all the other steps—the absence of a support system, and racism, which is an integral part of all the obstacles I just listed.

Our organization's current funding does not enable us to hire someone who could work specifically with that population and meet their unique needs. I remind you that we have 41 beds, but 85% of the time, we have a single employee on site to support the residents, prepare meals, answer calls, take in community donations, and so on. So you will understand that the issue of discrepancy between the number of existing beds and the number of available beds goes beyond the question of available physical beds. It is important for an increase in the number of beds to go hand in hand with an increase in core funding and a program for women and children.

If I had more time, I would talk to you about an employee's typical shift, but I will rather encourage you to visit a transition house in your region. You are certainly welcome to come to ours.

Before I conclude, I want to repeat that it is necessary to adopt a Canada-wide policy on housing and domestic violence.

• (1650)

[English]

The Vice-Chair (Ms. Pam Damoff): That's actually your time.

You did provide a brief, which the clerk will be getting translated and will be extending around to everyone.

Ms. Geneviève Latour: Excellent.

The Vice-Chair (Ms. Pam Damoff): Thank you.

We will now turn to Iris Kirby House and Fiona Cunningham.

Ms. Fiona Cunningham (Mental Health Counsellor, Iris Kirby House): Good afternoon.

Thank you for the opportunity to be here today.

I'm Fiona Cunningham. I am the mental health counsellor for Iris Kirby House in St. John's and O'Shaughnessy House in Carbonear, Newfoundland and Labrador. Our organization provides support and shelter from domestic violence for the Avalon region of Newfoundland and Labrador, servicing a population of over 260,000.

Our shelters have 32 and 15 beds, respectively. Additionally, we have 13 second-stage housing units. Last year, we collectively housed over 350 women and children, and answered almost 900 distress calls. Additional services include supporting ex-residents. We answered about 1,400 phone calls last year providing recreational and therapeutic groups for women and children, and providing system navigation housing support.

We work from a trauma-informed, empowerment-based approach, incorporating harm reduction and an individualized approach to each woman's and each family's needs.

From the front-line staff, who are responsible for the daily health and safety of the residents in the building, to all supportive and administrative personnel, we are a hard-working organization. But no matter how hard we work, there are gaps in the system: services we need that don't currently exist, and women and children who fall between the cracks. It is important to note that the gaps in the system don't necessarily exist within the shelter system, but at the intersection between agencies and services.

What do some of those gaps look like for us?

First, there is no women-only homelessness shelter in our area. Trauma-informed practice allows us to understand that women with extensive histories of gender-based violence sometimes cannot live in a mixed-gender shelter. The women we interact with may not be coming directly from gender-based violence, but their histories are richly narrated, and their present-day struggles are a direct result of gender-based violence. They have nowhere to go, nor do they fit within our service parameters. We need a continuum of services to support homelessness as it intersects with domestic violence.

Second, we experience long wait times for mental health and addiction services. These can be upward of six months just for an intake assessment, before service can even begin. Women who struggle with communal living for a variety of reasons, often mental health or chaotic drug or alcohol use, cannot access shelter services, nor can they access timely addictions and mental health support.

Third, there's a lack of transportation to and from services. Women may not have the ability to navigate a public transportation system due to trauma, mental health restrictions or mental acuity, or the area where they need to go may not even be accessible by public transportation. It is not enough for a service to exist; it must also be accessible.

Fourth, our current shelter system is a reactive, acute model, much like the revolving door of our acute mental health care hospital system. Clients often need an approach that is outside the current funding guidelines, which creates limitations on the support and healing we can provide.

Fifth, our legal system can fail to provide safety to women who wish to return home or even live safely in their community, which can create unnecessarily long and restrictive stays in our shelter. Denial of emergency protection orders because a woman is in a shelter aligns the system with the abuse and can begin the cascade of reasons why a woman feels unsafe and distrusting within a legal system that re-traumatizes her.

Sixth, another gap is the need to prove poverty in order to access legal representation. There's a group of women who fall above the legal aid cut-off but are unable to pay for legal representation as well as meet their basic needs. This can create a gross disparity between the woman who has survived domestic violence and the abuser. In effect, it creates another modality in which the abuser can continue, and even increase, the violence.

Finally, a woman with employment can have her job threatened due to the need to take time off for medical, police, and legal appointments, and the time it takes to move from home to shelter to a new home. Much of Newfoundland and Labrador is rural, and there are no shelters to be accessed locally, meaning that a woman may have to choose between safety and employment.

Some solutions to the above gaps include the ability to provide flexible, individualized approaches to working with women and families. In the year that I have been employed as the mental health counsellor at the shelter, I don't think two days have looked the same. Front-line workers need the space to be creative in their interventions. Systemic constraints not only revictimize clients on a daily basis but create vicarious trauma in workers as they stand in helplessness with their clients, unable to have their basic needs met. When funding is provided in a rigid framework, women who need services quickly fall outside the box.

•(1655)

We need to provide training and a focus on trauma-informed practices, not just within the shelter system but as a requirement of training for police, lawyers, judges and all support personnel working within the systems to reduce re-traumatization and to begin to create a system that believes and supports women's stories.

We need more access to drop-in, short-term, single-session mental health and addiction support services, specifically those that are trauma-informed and women-centred.

We need to view access to legal representation from a rights-based approach and provide each person interacting with the legal system timely and adequate representation.

We need a shelter system that includes appropriate care to trans and non-binary individuals. A system needs to understand gender as a continuum rather than a duality.

We need to differentiate between women who experience sexual exploitation and those who participate in consensual sex work. Under the shelter system, we need to simultaneously and effectively respond to both groups, which can have vastly divergent needs.

Also, we need a national domestic violence lead policy so that women can both retain their employment and deal with the time-consuming tasks that are thrust upon them as a result of surviving domestic violence.

I wish to thank the committee for taking the time to hear my voice, but I do not have lived experience of domestic violence. It is my wish to elevate the voices of the women around me who do, as I speak from a place of privilege. Therefore, I would encourage the committee to speak directly to those affected by interpersonal gender-based violence, to truly hear stories that are infused with colour and meaning and need. When we take the time to honour each and every woman who has lived and is living the horror of domestic violence, we will find with their strength and resilience that we will seek and find solutions. In listening to them with open hearts and minds, we will be able to stop gender-based violence.

Thank you.

The Vice-Chair (Ms. Pam Damoff): Thank you very much.

We're now going to turn to our last witnesses, Daisy Kler and Jean Fong, from the Vancouver Rape Relief and Women's Shelter. I'm assuming you're splitting time.

Ms. Jean Fong (Transition House Worker, Vancouver Rape Relief and Women's Shelter): Thank you.

Good afternoon. Thank you for inviting us to speak today on this important topic. My name is Jean Fong, and I have been a collective member with the Vancouver Rape Relief and Women's Shelter for the past 15 years.

Established in 1973, Vancouver Rape Relief is Canada's first rape crisis centre. It operates a 24-hour rape crisis line and transition house for women escaping immediate male violence. We respond to roughly 1,300 calls and house around 100 women and their children fleeing male violence every year. Women who call us have been raped, battered, sexually harassed, incested or prostituted. They're immigrant women, indigenous women, women of colour, women from rural areas and urban centres. They're women of all classes and all races.

We operate as a collective of paid and unpaid members. Our membership varies in age, race and class. Our membership includes former battered women, women who have exited prostitution, sexual assault survivors and women who have lived in our transition house. Women call seeking emotional support, information and help with the criminal justice system, but mostly women call because they're looking for somewhere to go.

Through our daily work, we see that women's homelessness is tied to male violence against women, colonialism, racism and poverty. Because of male violence, women are forced to leave their homes to protect themselves and to protect their children. Women leave and go to hotels; homes of friends, family members, and sometimes strangers; and of course, transition houses and women's shelters. Overwhelmingly, the majority of women who have lived in our transition house are poor women, women who don't speak English, and indigenous women.

But transition houses are more than just a place to go. They are a women-only space where women are able to heal, regroup and connect with other women who are also escaping male violence. In transition houses, women talk with one another and begin to understand that the violence they endured is not a result of what they did or did not do, nor is it unique to them, but a symptom of patriarchy and the world we live in.

Women celebrate each other's successes and cry with one another when everything seems insurmountable. Transition houses provide space for women to be able to imagine how to move forward, to make plans for the future and to learn how to dream.

In the course of their stay, we also help women apply for welfare, find housing, obtain a lawyer for things like custody and access, make police statements, and find day care, child care, translation, and almost anything else they may need on a daily basis. We continue to be available as a resource and support for a woman who has lived in our transition house long after she has moved out, because matters like those I've just listed continue well past her stay. Often within the first 18 months after a woman leaves, her attacker will escalate his violence in an effort to stop and dissuade her from untangling her life from his.

In closing, I'd like to say that a multitude of initiatives, services and programs working together and alongside each other are necessary to help women be free from male violence. But access to women's services like transition houses and rape crisis centres is limited. There's no excuse for the lack of these essential resources, and they must be available to all women when they choose to leave a dangerous situation. Transition houses and rape crisis centres, and their programs, must become an economic priority for the federal government.

Thank you.

● (1700)

Ms. Daisy Kler (Transition House Worker, Vancouver Rape Relief and Women's Shelter): My name is Daisy Kler. I am a collective member at Vancouver Rape Relief and Women's Shelter as well. I've been there for about 20 years. My main area of work is in the transition house with the battered women and their kids.

Most of us have already talked about the need for funding for transition houses and affordable housing, so I'm not going to do that. I'll address other gaps in services that undermine a woman's ability to leave an abusive man.

The larger context is that in the 1990s, the federal government began downloading federal responsibilities for social programs such as subsidized housing, social assistance, child care and health care to the provinces. This dismantling of the social safety net undermines women's equality. No access to adequate housing, universal child care, health care, and abysmally low welfare rates increase women's vulnerability to men's violence.

Our recommendations are the following.

The first is about operational funding. There must be independent, women-controlled rape crisis centres and transition houses, with federal operational funding, in every community in Canada, including reserves.

The second is about welfare rates. Forty-five years of anti-violence work tells us that women need economic security in order to leave a battering husband, a sexually harassing boss or a violent pimp. Pay equity legislation is good for those who have secure work. Women in dire poverty and precarious employment need livable social assistance. The federal government should re-establish and strengthen national standards for social assistance rates with cost sharing and enforcement measures, so that each province has to comply. This step can be taken immediately.

For a long-term measure, we call on a guaranteed livable income, universally accessible, with no conditions or strings attached. This can be achieved through a negative income tax mechanism. A guaranteed livable income for a woman is how she can escape an abusive partner, and it can also prevent women from entering into abusive relationships out of economic necessity.

Third, on transportation, British Columbia is home to the infamous Highway of Tears, where many indigenous women have gone missing and been murdered. We have lost our Greyhound bus services. Infrastructure such as highways and transportation is both a federal and a provincial responsibility. We want affordable, frequent and accessible public transportation. Battered women in rural areas cannot even get to transition houses and have to resort to unsafe travelling methods that increase their vulnerability to men's violence.

Fourth, with regard to indigenous women on reserves, shelters funded by INAC, Indigenous and Northern Affairs Canada, receive far below the amounts received by provincially funded shelters. INAC must fund on-reserve shelters at the same level as off-reserve shelters. Also, since no community operates without a sexist bias toward women, funding should not be vulnerable to the whims of changing band councils that may not prioritize fighting violence against women. INAC-funded shelters must be independent from band councils and be in the control of indigenous women from that community.

Fifth, on policing, when women experience male violence, the first point of contact is the police. When the police fail, it undermines women's access to protection through the criminal justice system. The RCMP is in disrepute because of their sexist violence against their own female officers, and because women have no faith in police protecting them from violent men. Abusive men are rarely arrested. Often, police do not prioritize domestic violence calls, and few arrests result in convictions. The federal government has to take a leadership role and direct police across Canada to take violence against women seriously, prioritize crimes against women and force change in the attitudes and actions of the police across the country.

Thanks.

• (1705)

The Vice-Chair (Ms. Pam Damoff): Thank you very much.

We're now going to turn to Bob Bratina for our first seven-minute round of questions.

Mr. Bob Bratina (Hamilton East—Stoney Creek, Lib.): Thanks.

Thank you all for your testimony.

I've said to the two previous witness panels that Marc and I have been on city councils—I was a mayor—and we interfaced with women's shelters. I have to say it's somewhat unnerving to talk to women who weren't necessarily happy that you were talking to them because of their recent experience.

The first thing that comes to mind is the people. As you said, there is perhaps only one person on a shift. How do you recruit people to come into this kind of work? Where do they come from?

Daisy, go ahead.

Ms. Daisy Kler: We are a bit different. We're a mix of volunteer collective members and paid staff. We think women are very interested in coming in to do the work. That's not the problem; the problem is that we do without.

We have public service announcements. We're known in the community. We do public education. We don't rely only on government funding, because we know we can't. We don't get any federal money for anything.

We have good retention, partly because we try to be as non-hierarchical as possible. We operate on a consensus basis, with a mixture of volunteer and paid staff.

Mr. Bob Bratina: Is there a burnout factor in this kind of work?

[*Translation*]

Ms. Geneviève Latour: I think that vicarious trauma was previously mentioned. We try to avoid it, but even with education and good will, without the necessary resources, that trauma is certainly there.

I think it is possible to avoid it. As we said, if we had better core funding, many women who want to work in our centre could do so. However, under the current conditions, it is not always easy for them to assume all the responsibilities we assign to them. You are right to talk about compassion fatigue, burnout and vicarious trauma. However, if we had the resources needed to provide women who want to do this work with reasonable work conditions, I think these problems would be entirely avoidable.

[*English*]

Mr. Bob Bratina: Thank you.

There's a high school in my city where 10% of the student population was identified as homeless. Perhaps those children were coming from violent family episodes and just had to run away. Some of them had gender issues and were not welcome in their house anymore.

For many of the women you see in the work that you do, are they aware of where their children are? There must be many cases where there is a kind of hidden homelessness based on the inability of the child to relate to either the mother or the father, or where they've escaped for their own safety. Would you comment on that?

• (1710)

Ms. Fiona Cunningham: I find that there are different populations. I don't think I could say that the women who are with us don't know where their children are. Even though some may have children in care, they're aware of where they are.

Now, we certainly do have youth homelessness, that population, and I'm sure we have that happening in all areas across Canada, but I see it as a separate thing that's occurring.

Mr. Bob Bratina: Some of those youth are female. They're girls.

Ms. Fiona Cunningham: Certainly, yes.

Mr. Bob Bratina: All of you talked about the increase in the need to get this work done. Is that increasing faster than the normal population rate? Is there something going on?

Ms. Daisy Kler: Well, I think what's going on is that there's not much left of any of the social safety nets. Everybody talks about intersectionality, in terms of the approach we take in analyzing race, class and gender intersecting to cause even more barriers for women, but when you look at the solutions, it cannot be only one. The solutions are to women's poverty; the fact that police do not respond to violence against women and do not protect women; the fact that there's a housing crisis across the country. The increase in pressure for women to be able to leave and actually have somewhere to go....

It's one thing to be in a transition house, but we're keeping women for three, four or five months now, because there's nowhere to put them after that. If you tell a woman that a single woman on welfare in British Columbia gets \$710 total and the rent in Vancouver is \$1,500 for a one-bedroom, what are you saying to that woman about trying to leave and being bold enough to leave? She has nowhere to go.

As there's an erosion of all of our social programs and no federal national standards that can be enforced—or at least some cost-sharing measures—women are in dire situations.

Mr. Bob Bratina: I gather that what you're saying is that any report where we bring forward recommendations has to be broader than simply the resources that you desperately need. There's a whole societal thing happening here with police and with government agencies. Would you agree with that?

Ms. Fiona Cunningham: Yes. Services need to be seen as completely wrapping around, certainly.

Mr. Bob Bratina: It's a tough testimony for us to hear. We've heard a number of panels. For instance, I was in the Far North, in Yellowknife. We heard in the previous panel about the difficulty for women in the Far North accessing services, and the Greyhound bus situation and all of that.

It would seem to me that the simplest thing in all the problems we're talking about is to allow people to move around to where they need to in order to get help. I'm wondering if there's some way that we can put together a recommendation whereby the government would try to, say, purchase a number of flights in advance over the years so that people could simply access a seat on a plane, a seat that has already been paid for. That way the airlines—the smaller ones, as they are—would have resources available to do this without having to solve it in a crisis moment as the situation occurs.

The Vice-Chair (Ms. Pam Damoff): That's your time.

Mr. Bob Bratina: Okay. Well, that's my recommendation.

The Vice-Chair (Ms. Pam Damoff): Thank you very much.

We'll now turn to Ms. Harder for seven minutes.

Ms. Rachael Harder (Lethbridge, CPC): Thank you.

Just before I go to my questions, I wish to give notice of a motion:

Given that Status of Women Canada is changing to the Department of Women and Gender Equality, the Standing Committee on the Status of Women invite the Minister to brief the Committee on her new mandate no later than Wednesday, December 5, 2018, and that this meeting be no less than one hour in length.

Sorry, that was a small procedural thing.

First, I'm going to start with a question for Atira Women's Resource Society. You mentioned in your opening remarks the idea

of using shipping unit containers for housing. I'm wondering if you can comment on that a bit further. I find that to be a unique idea. It's something that's often thrown around, but this is the first time that I've actually been able to talk to someone who has done it. Can you talk a little about the success you're having there and/or some of the challenges you face?

Ms. Caithlin Scarpelli: Sure. That project was built in 2011. After the Olympics in Vancouver, BC Hydro had a demonstration home on its front lot in Vancouver, which was built out of a shipping container. It had a call for proposals that you could put in to see if you could have it. We were successful in that call, and that's how the shipping container project started.

Right next door to a program that we already had, we have a lot that is really long and skinny. We were able to work with a construction manager to develop two buildings, three storeys each, of shipping container multi-dwelling units. Inside they are about 290 square feet. They are self-contained. They have their own kitchen, bathroom and a washer/dryer combo unit. They are currently specifically for women who are older and who are providing mentorship to the young women who live next door. There's an intergenerational mentorship program that happens there.

Once you get inside the container units, you wouldn't be able to tell that they are container units. They are fully fitted. They have spray-foam insulation. They have curtain wall fronts. They're really beautiful. So far, they've worked very well. The construction cost was about \$82,500 a unit, versus a traditional housing structure, which is roughly, I think, about \$200,000 a unit.

•(1715)

Ms. Rachael Harder: That's very cool. Thank you.

My next question is going to go to Ms. Latour. You talked about immigrant women and the fact that they face different challenges than do non-immigrant women. Can you talk with us a bit more about that?

In particular, one group that captures my heart right now is the Yazidi women and girls who are coming over from northern Iraq to find shelter here in Canada, but there are many others, certainly, coming here with hope for a better life. Can you talk about some of the challenges they're facing and what can be done better in order to serve this population?

[Translation]

Ms. Geneviève Latour: Yes, of course.

I haven't talked about the possibility of establishing contact with those groups and building ties with their home communities. However, once those people hear about our programs and come to us, they face systemic racism. Beyond the violent trauma she has experienced, a woman who is facing fewer obstacles and is simply looking for housing will often be a victim of racism. Some owners will not want to rent an apartment to her because she has too many children for their liking, for example.

In the case of a woman who wants to obtain refugee status, the simple steps to do so can take time, during which she won't have free access to health care. If she has children, the costs are exorbitant. She receives no social assistance and, therefore, has no income. Yet she has expenses because she must live. That is only one example among many.

In addition, there is sometimes a linguistic barrier. For example, some women wanted to file a complaint with the police, but they had to use Google Translate for their statement. Those women have a big learning curve ahead of them regarding support services provided in the region. So we must really be able to support them and provide them with longer-term services. Even once they have an official status, the New Brunswick Department of Social Development limits the length of their stay in a shelter before those women lose their benefits, even if they have not completed the process to obtain their identification papers. So the situation is very complex.

That is why we absolutely need specific programs. I'm not even talking about support those women need related to the trauma of the violence they have suffered in Canada and perhaps also in their home country, or the interventions required with their children, if they have any, including support for them within the school system. We are seeing more and more of those types of women with those kinds of needs. Our staff has the knowledge needed to help them, but it is really difficult to provide them with the support they need if we have to split ourselves among 41 individuals.

[English]

Ms. Fiona Cunningham: I would like to add to that.

Ms. Rachael Harder: Please answer very briefly, if you can, because I have a question for you.

Ms. Fiona Cunningham: I did not have time, obviously, to talk about everything, but this is something that our shelter also faces. I'm sure I could talk at length as well.

Ms. Rachael Harder: Ms. Cunningham, it's outlined that within your organization there are 13 second-stage housing units. It sounds like there's a partnership taking place between Canada Mortgage and Housing Corporation, the federal government and the IKH Foundation. Can you clarify and help me understand exactly what that looks like?

• (1720)

Ms. Fiona Cunningham: I don't know a lot of the financial background, and how they came about. Some of them have been around for 15 to 20 years. Where the original funding came from for some of the units, I'm not sure. I may not be helpful to answer that.

Ms. Rachael Harder: How does it work when the women first come into the shelter, and then they transition into these second-stage housing units?

Ms. Fiona Cunningham: They are all managed by our organization. They all fall under the umbrella of Iris Kirby House and O'Shaughnessy House. There's an assessment done on what we have available and which women would be the best fit, based on what individually is going on with them at the time and what's going to help them move forward.

The Vice-Chair (Ms. Pam Damoff): That's your time.

We will go to Ms. Malcolmson, for seven minutes.

Ms. Sheila Malcolmson: Thank you, Chair.

Thank you to all four groups. There's so much we can harvest from this.

We've been hearing from a number of panels that the #MeToo movement, the lifting of the taboo against reporting and asking for help, has blown the lid off the sexual violence that is happening in the world. Thanks to all of you for doing the front-line work and saving lives.

Have you seen the federal funding match the increased amount you have? Talk to us a bit more about whether the need is being met by the funding that's available.

[Translation]

Ms. Geneviève Latour: I can begin.

As I mentioned, in our case, we have not received any operating funds. So we have not seen any increases, since we went from zero dollars to zero dollars. However, we have received capital funding to increase our number of beds. In that area, we have the material resources to accommodate those women, and that funding has increased significantly in the wake of the movement.

However, the core funding has not increased since the beds were built and became available. So we have two and a half times more beds, but only 4% more funding, which we obtained through fundraising. To answer the question, our budget did indeed increase to help us acquire more beds, but we still have no operating budget. So we are still doing more with very little.

[English]

Ms. Daisy Kler: We don't get any federal money. I think that was the point of what I said in terms of the federal government downloading the responsibilities to the provinces over time, since the 1990s, without ensuring how provinces are spending that money. This means that most of us go without any federal funding. BC Housing funds our transition house for our 10 staff members. We receive no operational funding for the transition house in terms of federal money, and no operational funding for our rape crisis line. We fundraise in other ways. So, anything is better than what we have now.

Obviously, what we're saying, as women's groups, is that we're part of a bigger movement. The #MeToo movement is part of the women's movement, and part of what sustains us is seeing ourselves as part of a social change. I think that if we have a women's equality interest, then core funding—without very many strings and without too many reporting mechanisms—is the way that we're going to be able to sustain ourselves and be creative in this time of uprising. That's what we're all saying in a similar voice.

Ms. Sheila Malcolmson: Thank you. We'll just keep repeating it.

We've had some witnesses before you be quite critical of the new Status of Women funding. It looked like it might be supportive of organizations such as yours, but does anybody have success stories with that yet? Does anybody have any extra criticisms that they want to offer?

Ms. Daisy Kler: I'm sorry, which one? Is that the capacity-building one or the one before that?

Ms. Sheila Malcolmson: We had some hope that the capacity-building one might help, or that it was initially about operational funding, but in fact we heard, for example, from the London Abused Women's Centre, which said that it doesn't fit what they need at all, and that it's still top-down and prescribing what the government thinks they need, as opposed to what they and the survivors know they need.

Ms. Daisy Kler: We applied, and we didn't receive funding. The capacity one is a little better, in that you're now allowing for advocacy, but we didn't receive any of that funding.

Ms. Caithlin Scarpelli: Part of the issue that I find with grant funding and things like that is that when we do get operational funding, most of the funding goes into that programming but we struggle to pay the accountants, the woman who answers the phone and the door, and all of those essential services in administering our programs.

Part of what I'd love to see is a built-in structure where we're able to hire staff who are capable and who have the skills and experience. What that means is having enough money to pay people an appropriate wage to carry out those services. Somebody has to write the grant. Somebody has to write the report. Somebody has to account for the money. It's those types of services as well.

• (1725)

Ms. Sheila Malcolmson: This question is for any of the groups. Can you tell us a bit more about what it mean at a personal safety level for the women who are fleeing violence, but also for those of you on the front line, when you have to turn women away, when women have the bravery to come and ask you for help but you just don't have any room to help them?

Ms. Jean Fong: I can speak to what we do. When we have to turn women away, we try to find whatever available resources we can. Sometimes we get creative, and sometimes we work with other organizations to find where we can place women and what we can get them.

Going back to Mr. Bratina's question about burnout, that's really the point. As a transition house worker, as a crisis worker and as a collective member, I've been doing this work for 15 years. The burnout isn't from hearing the stories, because those are the stories that I hear from my friends and family members. The burnout is from hitting the wall in trying to find services that will help women with mental illnesses and addictions, and that will house women when there is no housing, especially for women who are escaping immediate male violence. Those are the things that are the most frustrating.

Ms. Sheila Malcolmson: Madam Chair, can you please ask the members not to talk while the witness is speaking?

The Vice-Chair (Ms. Pam Damoff): Sure. If you could let the witnesses speak, that would be appreciated.

Thank you.

Ms. Daisy Kler: One of the things we used to have that got cut was that, after hours, the provincial ministry would pay for a hotel if

there was absolutely nothing else available, if all the shelters were full. Now they barely take our calls after five o'clock.

I think each of us has probably worked out little deals like the one we have with the local YWCA hotel, which will put up a woman for us if we can't find anything else for her. Sometimes it's a mat program, and you hate to send her there because it's not that safe and it's pretty scary. If she has children, she's worried about them getting apprehended, so she might not even say that she's homeless because some places would think that she was not able to provide for her children, which often entails Car 86, as we call it in B.C., the police car with the ministry social worker.

There is a relationship with how they view the police as being unhelpful or sometimes even more than unhelpful, destructive.

The Vice-Chair (Ms. Pam Damoff): I'm going to have to end it there. Thank you very much.

Eva, you'll have about three minutes.

Thank you.

[*Translation*]

Mrs. Eva Nassif (Vimy, Lib.): Thank you, Madam Chair.

I thank our witnesses.

My question is for you, Ms. Latour. You said that you deal with a lot of immigrants, but you did not specify what percentage they account for. Since those women are facing a number of obstacles, including linguistic ones, how do they manage to express themselves? Do they come to see you immediately? Even if they are being abused, do they periodically go back to their husband because they are dependent on him owing to their poverty and because they may fear losing their children? Tell us a bit about those women of various ethnicities who turn to you.

Ms. Geneviève Latour: We use various tactics. For example, we participate in prevention workshops in schools, where we explain to children what healthy relationships are and tell them about the available resources. A number of mothers have told us that it was their son, coming back from school, who told them that they did not have to suffer all that violence and that shelters existed. So those workshops are a winning strategy.

It is also important to establish relationships with immigrant reception centres and get involved with cultural events in the region. It is a matter of making our organization known and helping people recognize symptoms of family or sexual violence.

So there is more than one way to proceed. That said, I am sure that we are not reaching many women because they speak neither of the two official languages, because their children don't go to school or because they do not participate in those cultural events. We are currently working on that. We have a committee that is looking into this issue and it is making a lot of presentations to various groups.

Moreover, any woman may decide to return to her husband, even if he is violent, but she can also come back to see us. When I started out, I saw that return to her husband as a failure, but my perception has since changed. Now, when that woman returns to us and sees that I am still there and am not judging her, I consider that to be a success. We represent a safe environment where the woman is not judged and where she feels comfortable to return as needed. I think that's amazing.

Of course, we are not really happy to see that woman return to her husband, but it is important to remember that it is her decision and that we have to respect it. I think that respect is why they come back to us when they feel the need to or they call us to say that things are going better or that they have not felt the need to come back, that they separated from their husband and are now living on their own. Creating that relationship is extremely important.

• (1730)

[*English*]

The Vice-Chair (Ms. Pam Damoff): That's the time.

Thank you very much to all of our witnesses for being here today.

Before the committee members leave, and because the chair isn't here today, I'll note that when we passed our motion on this study, it was for eight meetings. There is the possibility that the chair will need to add a ninth meeting, because there is a statement in the House on Wednesday. In order to give her that flexibility, could one

of the committee members give us a motion that would add a ninth meeting, which would be called at the discretion of the chair?

Would someone like to give me that motion?

Ms. Sheila Malcolmson: I am happy to move what you said.

The Vice-Chair (Ms. Pam Damoff): I will ask you to read the motion, then.

Ms. Sheila Malcolmson: Thank you. Things happen magically here.

I move:

That, notwithstanding the motion adopted by the Committee on Tuesday, June 19, 2018, in relation to the study of the network of shelters and transition houses serving women and children affected by violence against women and intimate partner violence, the Committee add a 9th meeting to be called at the discretion of the Chair.

The Vice-Chair (Ms. Pam Damoff): That's well written.

Ms. Sheila Malcolmson: It just came to me.

The Vice-Chair (Ms. Pam Damoff): Is there agreement on the motion?

(Motion agreed to)

The Vice-Chair (Ms. Pam Damoff): We will reconvene on November 7.

Thank you all for your time and attention. The meeting is adjourned.

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