

Committee for the Status of Women and Human Rights (CSWHR)

Issues of Note for SWHR in Ontario January 2022

(Note: Information appearing below may have been taken verbatim from sources. The author in no way intends these to represent original work.)

1. 2021 Human Rights Watch Published and Canada Fares Poorly – Again

Canada enjoys a global reputation as a defender of human rights, aided by a solid record on core civil and political rights protections that are guaranteed by the Canadian Charter of Rights and Freedoms. However, the government faces longstanding human rights challenges. Many of these relate to the rights of Indigenous peoples, including violations of their right to safe drinking water and police mistreatment and abuse of Indigenous women and girls. Canada also grapples with serious human rights issues relating to the placement of children in immigration detention, and the use of prolonged solitary confinement. Internationally, the Canadian government has not taken effective steps to address abuses linked to the overseas operations of Canadian extractive and apparel companies.

<https://www.hrw.org/americas/canada>

2. Social Contracts

The argument that one should never subject another to risk, at least without that person's consent, is a nonstarter. In driving to work, I'm spreading risk far and wide, even if I complete my journey safely. Not even walking exempts me. I might slip and fall and push a stranger into the path of a passing car. And on it goes.

Rather than assuming a right not to be subjected by others to risk, societies have typically come to an agreement that it's acceptable to impose some risks, provided certain conditions are met. You can drive, but not at 100 mph past a school. You must have passed a driving test, and you must maintain your car to a safety standard. As a society we put physical, social, and legal mechanisms in place to keep risk within bounds. And in the case of driving, if you do harm someone, normally you pay, though in other cases, such as infectious disease, we've historically let the loss lie where it falls. If I go to the bar with flu symptoms and infect you, we do not allow you to sue me for a fortnight's lost wages. Not yet, anyway.

What we consider to be acceptable changes. Once, we allowed smoking in restaurants, shrugging off the dangers of secondhand smoke. In the recent past, we [encouraged people to show up for work](#) even when coughing and sneezing. We settled into this pattern because it was a real nuisance for employers to be short of staff, and for the great majority of co-workers, catching a cough or cold was hardly a disaster. The pandemic, though, created a new situation. Infecting others with the coronavirus can lead them into serious difficulties. In the worst case they will die, and even in the best case, their life will be disrupted for the [isolation period](#). In the middle are those who acquire [long COVID](#) or need hospital treatment, using up resources and contributing to a situation in which hospitals may be overwhelmed and others may be denied urgent, perhaps lifesaving treatment.

Under negotiation right now is the boundary between reasonable and unreasonable COVID-risk mitigations.

Some who won't accept the vaccines or wear masks say they are simply asserting their rights over their own body. Morally, it's more like choosing not to have routine safety maintenance done on your car. Refusing to wear a mask is less a matter of exercising a personal liberty than comparable to driving at 60 mph in a 40 mph zone. The point is that though it may be up to you what risks you run for yourself, it is not purely up to you what risks you impose on others. That has to be a matter of the social contract. We can no more accept personal choice about infectious-disease control than we can over speeding limits.

The situation is trickier if the anti-vaccine mask refusers contest the received wisdom that vaccines and masks are effective mitigations.

...vaccines are highly effective against serious illness and as safe as the great majority of medications. Public-health authorities are quite united in recommending mask wearing as a technique for slowing, if not stopping, transmission of the coronavirus. That's good enough for me.

In this pandemic we've been making it up as we go: new public-health measures, new vaccines, new medicines. Lagging a bit behind is the new ethics for this new world, by which I mean a revised moral social contract dealing with risk for infectious disease. Those who share my point of view on mitigation measures may be tempted to say enough already, and that bare-faced vaccine refusers who recklessly infect others should have to compensate their victims and overwhelmed health professionals. Whatever one thinks about this approach from the point of view of abstract morality, it's a poisonous public policy. Even if we could identify who caused harm, just think of the effect of punishing people who already distrust the system. We need to devise ways of drawing more people voluntarily into the risk social contract, rather than pushing them ever further away.

<https://www.theatlantic.com/ideas/archive/2022/01/new-risk-social-contract-covid-ethics/621246/>

3. Gender Based Violence

Freedom from violence and harassment in all forms for all people are basic human rights protected by the Universal Declaration of Human Rights (December, 1948). Nevertheless, gender based violence remains a predominant form of violence which persists, even in Ontario, affecting the safety and lives of women and girls and gender diverse people, making equality, equity and justice a pipedream for most of those affected. An Elimination of GBV Action Plan must be developed, services to support those affected must be strengthened and strong laws against GBV must be enacted to create systemic change.

GBV is intersectional, encompassing education, housing, poverty, drug use, mental health, oppression, race, age, identity and class stratification, amongst others. Solutions must be multifactorial and government committed.

In March of 2018, the Ontario government announced the launch of a new strategy to end GBV after hearing from more than 200 agencies that help people who have experienced GBV, as well as people with lived experience and Indigenous partners. The government proposed an investment of \$242 million to support and continue the work that had been launched by the same government in 2015.

The current government, elected June 2018, disbanded the expert panel providing guidance on GBV in October 2018 and eliminated previously proposed investment. In fact, not only have the funds for an Action Plan been eliminated, funds for public housing have been cut, tenancy rules have changed in favour of easier evictions, basic income pilot projects have been eliminated, and funding to mental

health and addiction centres has been cut entirely or reduced. The list of cutbacks which adversely affect safety for women, girls and gender diverse people from this government is lengthy.

GBV has actually increased in Ontario (and worldwide) since the beginning of the pandemic (the shadow pandemic). In Ontario, 58 women and girls have died violently from November 2020 to November 2021, representing over half of the women and girls violently killed nationally. Sexual assault statistics tell their own horrible story: one in 10 reported sexual assaults results in a conviction and it is estimated that only six in 100 rapes are reported.

Covid has deepened every social, political and economic inequality that existed before the pandemic. Social distancing and stay at home orders, along with less access to child care and income loss have created a situation where there is increased intimate partner relationship instability, increased mental health problems, increased drug and alcohol abuse and less access to already overburdened support services for victims of GBV.

It is not just a human rights issue, it is also an economic issue. In Canada, spousal abuse alone costs taxpayers \$7.4 billion per year to deal with.

4. Human Trafficking

Human sex trafficking is a hidden epidemic happening in plain sight and its frequency is growing. Amongst all of Canada, Ontario represents the largest proportion of trafficked people for sex. The vast majority are women and girls, 64% of trafficked victims are 24 years of age or younger, and the average age overall is 17. Indigenous girls and women make up a disproportionate percentage.

Sex trafficked persons are denied autonomy and dignity, suffer severe emotional and physical abuse and whose lives are at risk. Survivors of trafficking face the consequences of mental and physical trauma, are often ostracised, and often lack independent living skills. Human and societal costs are huge.

Human sex trafficking, its abuses and exploitations are increasing. Convictions against traffickers in Canada occur in only about one third of reported cases. Survivors are reluctant to report that they have been trafficked. If reported, most cases will not result in a charge and most charges will not result in a conviction.

“It’s not something that we can arrest our way out of,” says RCMP Cpl. David Lane, who heads the inter-agency Nova Scotia Human Trafficking Unit. “The best human trafficking case is the one that doesn’t happen.” The hallmarks of victim profiles reinforce the need to educate educators, parents and youth early and continuously regarding the forms of manipulation and coercion used by traffickers, what healthy relationships look like, as well as detection of vulnerable youths and early trafficked youths. For those who have been trafficked, appropriate, well-funded services need to be in place.

In March 2020, the Ontario government announced the development of a five year, multi departmental anti-trafficking strategy and promised an investment of \$307 million. In May of 2021, Bill 251, Ontario’s *Combating Human Trafficking Act* was carried into legislation. The Bill is thought to rely too heavily on law enforcement and violates several human rights. Nevertheless, in the Fall of 2021, the Ontario Provincial Police (OPP) announced details about the Provincial Human Trafficking Intelligence-led Joint Forces Strategy (IJFS), under which the OPP is charged with identifying, investigating and disrupting multi-jurisdictional human trafficking organizations operating in the province.

Under this strategy, the Ontario government has adopted policy aimed at educator and child/youth education through the Anti-Sex Trafficking Policy (Program/Policy Memorandum 166, July 2021). As of January 31, 2022, all provincially funded school boards, school authorities and provincial and demonstration schools in Ontario must have anti-sex trafficking protocols in place. Each school board is left to develop their own policies, protocols and programs and the government policy requirements only address Grades 1 to 8. The vulnerable teen sector is absent.

<https://www.state.gov/reports/2021-trafficking-in-persons-report/canada/>

5. Ontario Human Rights Commission Statement Regarding Disproportionately Affected Groups and Covid (January 2022)

Mounting evidence shows that groups identified under Ontario's *Human Rights Code* have been disproportionately affected by the pandemic. These effects are being exacerbated by the current Omicron wave and the recent decisions to close and reopen schools.

The mental health and addiction impacts are particularly alarming, with high numbers of Ontarians reporting increased mental health concerns. Many people are struggling to keep their housing, feed their families and cannot afford to stay home during lockdowns and school closures. Women especially are experiencing the greatest difficulties emerging from the crisis.

School closures, since March 2020, have deepened inequities in education outcomes. Closures have led to significant physical, mental health and safety harms for many students and young children. The impacts have been particularly stark for students from low-income families, where Black, racialized and Indigenous groups, newcomers and people with disabilities are overrepresented.

An ongoing [human rights-based approach to managing and recovering from the pandemic](#) will help Ontario to address the harm caused by this pandemic, and to prepare for the future. This means addressing, at their roots, the profound and deadly inequalities exposed during the pandemic. It also requires an explicit education recovery plan with targeted and intensive accelerated learning programs for groups most disadvantaged by the school closures.

For more information see the Ontario Human Rights Commission's (OHRC) [Policy statement on human rights in COVID-19 recovery planning](#).

https://www.ohrc.on.ca/en/news_centre/ohrc-statement-human-rights-impacts-omicron-and-school-closures

6. Indigenous Peoples Right to Clean Water

Canada to Pay Billions to Indigenous Groups for Tainted Drinking Water

A court-approved settlement will compensate Indigenous people for the decades that many have lived with dirty water, and will also fund the clean up.

The Federal Court of Canada approved a multi-billion-dollar legal settlement that requires the government to take swifter action to clean up contaminated drinking water on Indigenous reserves and to compensate First Nations for the decades they have gone without access to clean water.

Under the settlement, released by the court late Wednesday, the government will commit to spend at least 6 billion Canadian dollars over nine years to fund water infrastructure and operations on hundreds of reserves, and will pay 1.5 billion dollars in damages to about 140,000 Indigenous people.

<https://www.nytimes.com/2021/12/23/world/canada/indigenous-water-lawsuit.html>