



FORWARD

Feminist Organization for Women's Advancement, Rights & Dignity

**Burned by the System, Burned at the Stake:
Poor, Homeless and Marginalized Women Speak Out**

**Report to the United Nations
On
Violations of the International Covenant on Economic,
Social and Cultural Rights
In Canada**

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SUMMARY AND RECOMMENDATIONS

FORWARD began as a human rights education program at a Toronto drop-in centre for women who are homeless and socially isolated. Since April 2005, over 40 women have participated in weekly meetings. The majority of participants have been migrant women, women who are racialized, and psychiatrized women. Our report is based on testimonies, discussion, and analysis that have emerged from these meetings.

We strongly urge the Committee on Economic, Social and Cultural Rights to consider the voices, knowledge, and experiences of poor women when formulating its Concluding Observations on Canada. Our lives bear the scars of Canadian governments' flagrant disregard of the Covenant in the period covered by this review. The rights violations we have experienced demonstrate that an adequate standard of living and adequate housing are fundamental to all human rights. The poverty, homelessness, and social exclusion we live with are contrary to the basic principles of human dignity and worth. Our demands, if acted upon in a meaningful way, would aid governments in Canada in fulfilling the true spirit of the Covenant and all human rights documents.

Articles 2 & 3: Non-Discrimination and Equal Enjoyment Poor Women Targeted and Marginalized

Our lives demonstrate that poor women don't have equal enjoyment of economic, social and cultural rights in Canada. We experience social exclusion, and abuse of poor women is pervasive. The perception that we are inferior and deserving of abuse is reinforced by State policies and by the actions and statements of the highest representatives of the State. This social exclusion and stereotyping make us targets for violence. Meanwhile, our strategies for survival are pathologized and criminalized.

We demand that the federal, provincial and territorial governments acknowledge the connections between violence against women and social and economic exclusion. These governments must re-evaluate all policies and practices in social assistance, child protection, and mental health to ensure that they reflect the worth and dignity of poor women, instead of contributing to our degradation.

Articles 6, 7 & 8: Work and Working Conditions The Exploitation of Poor Women

Many poor women in Canada are excluded from the protection of labour laws. The right to fair working conditions is connected with the right to social security, and it is a prerequisite for the rights to housing and health.

We demand that all workers in Canada, including migrant women and women receiving social assistance, be protected by all labour standards. We demand stronger mechanisms and better enforcement of these standards by governments.

Article 9: The Right to Social Security
No Security for Poor & Homeless Women

Social security rates across Canada are too low, and many poor women don't even have access to the inadequate social security programs that do exist. Women who are homeless often can't access social assistance. Poor women often don't qualify for Employment Insurance. The application processes for disability benefits in Ontario and other provinces are so riddled with barriers that they appear to have been designed to exclude those that need them the most.

We demand that governments in Canada ensure that all social security programs are adequate, available and accessible to all women who need them, especially women who are poor, homeless, disabled, psychiatrized, and migrants.

Article 10: Protection of the Family
Poor Mothers Targeted by Child Protection Agencies

Poor women are targeted, not supported, by child protection agencies. The right to protection of the family affects, and is affected by, the right to adequate housing and an adequate standard of living. The child protection system in Canada discriminates against poor women, especially women who are Aboriginal, racialized, and psychiatrized. This system also does not serve poor children well.

We demand that the money spent maintaining children in State care be redirected to providing supports for poor families. Poor mothers need access to adequate and affordable housing, nutritious food, respite care and voluntary ongoing counselling. The punitive and degrading nature of the current child protection system does nothing to improve our parenting.

Article 11(1): The Right to Adequate Housing
Not Every Dwelling Is a Home

Poor women across Canada live in conditions of extreme housing inadequacy. Canadian governments' primary response to homelessness—the creation of shelters—is problematic because shelters are not homes. Poor women live with insecurity of tenure, which affects our physical and mental health. Social housing is a vital resource, but it is often substandard, dangerous and degrading. Meanwhile, the homelessness of many poor women is hidden and so it is not addressed by governments' policies. Many sectors in which poor and homeless women seek housing—including rooming houses and group homes—are inappropriate, exploitative and abusive.

We demand that every person in Canada have access to a home that is adequate, affordable, secure and dignified. Governments in Canada must ensure that all forms of state-provided housing, including social housing and group homes, meet the highest standards of dignity and safety.

Article 12: The Right to Mental Health

Poor Women Harmed By the Psychiatric System

Poverty affects women's physical and mental health. Poor women's human rights are violated in the psychiatric system. Psychiatric labels expose poor women to further discrimination by State and non-state actors. In Ontario, recent legislation enables increased surveillance and control of psychiatrized women. Governments have cut budgets to counselling services while prescriptions for psychiatric medications have increased. Psychiatric labels and medication are used to mask the devastation of poor women's lives by poverty, homelessness, discrimination, and the loss of our children.

We demand supports for independent living, and programs to improve our mental and emotional well-being, such as counselling and access to traditional remedies. The most important mental health "treatment" is an adequate standard of living.

Article 1: The right to self-determination

Poor Women Are Deprived of Our Own Means of Subsistence

Women's poverty and homelessness in Canada enable the creation of middle-class jobs in welfare, shelters, child protection, and mental health facilities, and it increases the profit of landlords and employers. Decisions about government expenditures in these areas do not include the perspectives of poor women. Our lives are not for sale.

We demand our right to self-determination. We insist that women who are poor, homeless, and marginalized be included in the decisions that are made about our lives at every level—from the welfare office to government. Financial resources dedicated to improving poor women's lives should be placed in our hands, not used to perpetuate dependence on professionals and agencies.

1. BACKGROUND

1.1 History of FORWARD

FORWARD began in April 2005 as a human rights education program at a drop-in centre for homeless and socially isolated women in Toronto. With the help of two educator / facilitators, women began coming together every week to learn about human rights, analyze our experiences of having our rights violated, and discuss ways to make change. In December 2005, after the planned program of workshops and group meetings had come to an end, women who had been working on Claiming Our Rights decided to continue to meet each week to work together on actions to challenge poverty, homelessness, and violence against women. We chose the name FORWARD to express the optimism and determination that the group embodies. Since our inception, over 40 women who are homeless, poor, and extremely marginalized have participated in our meetings.

1.2 This Report

Most of the reports prepared for this review rely on statistics and research to show how Canada's federal and provincial policies have led to violations of economic, social and cultural rights. Our report is complementary to these, because it starts from women's own words to develop a picture of how rights violations unfold in the lives of the people most affected: migrant and Canadian-born women who are poor, homeless, racialized, Aboriginal, psychiatrized, older, disabled, queer, mothers, and survivors of violence.¹ This report was based on discussion and analysis that have emerged in the group over the past year, formal testimonies delivered by group members, and notes made specifically for this report at a series of meetings held in February and March 2006. In some cases these are supported by institutional documents, academic literature and media reports. In other cases the reader will have to rely on what we know from our own experiences, because this knowledge hasn't yet found its way into the media or the academy.

¹ In this report, "migrant" refers to women born in other countries who have arrived in Canada under a range of circumstances, including those brought to Canada as children by their parents; those without status; refugees; refugee claimants; temporary workers under programs such as the Live-In Caregiver program; those sponsored in adulthood by a spouse or family member; and those who immigrated independently.

"Homeless" refers to women who are currently without their own housing, or have been so in the past. In addition, the report reflects the experiences of women living in extremely inadequate housing, including housing that is unsafe, overcrowded, or unhealthy; housing that costs so much that women must rely on free meals at drop-ins in order to survive; housing in which women experience abuse from landlords, neighbours, cohabitants, and family members; insecure housing in which women face harassment and eviction; and housing that has been deemed unfit for children, causing women's children to be taken into State care.

"Racialized" refers to women who have been marked as non-white by socially constructed categories of race.

"Aboriginal" refers to indigenous women of the Americas, including First Nations, Inuit and Métis women, as well as women of indigenous communities of Latin America.

"Psychiatrized" refers to women who have been labelled with a diagnosis of "mental illness" or "mental disorder," those who have taken or been forcibly given psychoactive pharmaceuticals, and those who have been held against their will in psychiatric facilities.

"Queer" refers to women seen as sexually deviant by dominant values, for example women who are lesbian, bisexual, two-spirited, transsexual, transgendered, or sex trade workers.

We found it difficult to categorize the violations we have experienced by articles of the covenant. Poor women, by definition, are experiencing violations under Article 11, the right to an adequate standard of living. But these violations are usually entangled with violations of other social and economic rights, such as the rights to social security, health, and protection of the family. As well, our experiences show that social and economic rights are indivisible from civil and political rights. Violations of social and economic rights make women more vulnerable to violations of our civil rights, and violations of civil rights contribute to our social and economic marginalization.

Though the testimonies that ground this report are from a relatively small group of women, we caution that they should not be seen as representing unusual or anomalous experiences. In fact, the experiences we describe are common. The commonalities across women's stories prove that Canadian governments' policies and practices operate in similarly harmful ways in the lives of many poor women.

2. VIOLATIONS UNDER THE COVENANT

2.1 Articles 2 & 3: Non-Discrimination and Equal Enjoyment Poor Women Targeted and Marginalized²

“Women of a certain economic class are stereotyped as whores. This is used as an excuse for violence.”

Poor women don’t have equal enjoyment of economic, social, and cultural rights

Articles 2 and 3 of the Covenant guarantee non-discrimination in economic, social and cultural rights, and equal enjoyment of these rights by women and men. In Canada, this is not the case. Women—and especially women who are racialized, Aboriginal, disabled, psychiatrized, and migrants—are disproportionately represented among Canadians who experience poverty and severe housing problems including homelessness.³ We are disproportionately affected by cuts and eligibility restrictions in welfare, unemployment insurance, and housing; and by legislation that mandates increased surveillance and coercion by social assistance, child protection, and psychiatry.^{4 5} When women are marginalized economically and socially in this way, we become receptacles for mistreatment, degradation, and violence. And then, in a cycle that is truly vicious, the degraded image of poor women is used to justify the very policies and laws that increase our poverty.

Poor women experience social exclusion in Canada

Right now across Canada, poor women are excluded from social forums that influence our own lives and society as a whole. Our voices, faces and knowledge are not in evidence in the mainstream media, in education, or in government. Our needs and priorities are not considered in business, policy, or legislation. Our interests are not served by the systems of law enforcement, child protection, social assistance, health care, and mental health care / psychiatry.

Abuse of poor women is pervasive

FORWARD members and other women we know have endured countless incidents of discriminatory surveillance and intrusion by child protection and law enforcement agents, verbal and physical abuse by strangers on the street, sexual harassment by landlords, mistreatment by medical and psychiatric professionals, hostility from public transit drivers, exploitation by employers, arbitrary refusal of benefits by social assistance workers, and humiliation by shelter staff. The aggressors in these incidents

² In this report, “poor women” is to be understood as referring to low-income and homeless women who are migrant and Canadian-born, racialized, Aboriginal, psychiatrized, disabled, older, queer, mothers, and/or survivors of violence. The rights violations, marginalization, and targeting described are on the basis of the interaction of income and gender with these other factors.

³ CERA, *Women and Housing in Canada: Barriers to Equality*, March 2002.

⁴ *Ibid.*

⁵ Mosher, J. (2002). The shrinking of the public and private spaces of the poor. In Hermer, J. and J. Mosher, (Eds.), *Disorderly people: Law and the politics of exclusion in Ontario* (pp. 41-53). Halifax: Fernwood Publishing.

are targeting women on the basis of gender, class, race, colour, disability, age, citizenship, language, sexual orientation, family status, and / or appearance of homelessness. We do not see these incidents as discrete, separate violations of our rights. Instead, we see them as part of an overall perception of poor women as convenient and appropriate receptacles for abuse by anyone in a position of power, however slight that power may be.

Perception of poor women as inferior is reinforced by State policies and actors

This perception of poor women as inferior and deserving of mistreatment has been reinforced by state policies, and by the actions and statements of state actors. In the period covered by this review, policies in social assistance, child protection, and mental health law in Ontario have come together to paint a picture of poor women as cheats, bad mothers, and dangerous.^{6 7 8} This picture has been perpetuated by public statements by the highest officials of government.⁹ Poor women, and especially women who are homeless, racialized, Aboriginal, mothers, and psychiatrized, have been the targets of a hate campaign in Ontario, and in many other jurisdictions across Canada as well.

Social exclusion and stereotyping make poor women targets for violence

When poor women are portrayed as society's garbage cans, that's how we get treated. The effects are terrifying. FORWARD members have endured harassment, threats, attacks, and sexual assaults. These experiences aren't unique to members of FORWARD, they are well documented across Canada. The Native Women's Association of Canada and Amnesty International report that over 500 Aboriginal women—most of them impoverished and homeless—have disappeared or been murdered, and that the murders often were marked by extreme brutality.¹⁰ In Vancouver's Downtown Eastside and in Edmonton, Aboriginal and non-Aboriginal women working as prostitutes have been disappearing for years. In Vancouver, it took years for police to begin to investigate, and a site containing the remains of dozens of the women was discovered.¹¹ In Toronto, a series of murders targeted transsexual and

⁶ In 1995-96, the Ontario government cut welfare by 21.6%, toughened anti-fraud laws, increased fraud investigations, and introduced a "snitch line" encouraging people to call and report on their neighbours and family members. Victims of these policies included Kimberley Rogers, a woman who died while under house arrest for a conviction of welfare fraud. She had been cut off welfare entirely and was eight months pregnant.

⁷ In 2000, the Ontario government introduced new child protection legislation that increased scrutiny of women who entered domestic violence or homeless shelters with their children. Workers in such settings were mandated to notify child protection agencies of any child whose mother was escaping abuse.

⁸ Also in 2000, the Ontario government amended the Mental Health Act and the Health Care Consent Act to widen criteria for involuntary admission to psychiatric facilities, and to allow for the forced drugging of people living in the community. Though advocates argued that the existing test for involuntary admission—that a person present an immediate danger to herself or others-- was strong enough, the government justified the new legislation by suggesting that people with psychiatric diagnoses were unpredictably dangerous and violent.

⁹ For example, former Ontario Premier Mike Harris famously commented that he was terminating the \$26 per month nutrition allowance for pregnant social assistance recipients because, "We want to make sure they're not spending it on beer."

¹⁰ . Amnesty International Canada Public Brief, October 2005, http://www.amnesty.ca/campaigns/resources/sisters_brief_oct2005.pdf.

¹¹ <http://www.missingpeople.net/home.html>

transgender women working as prostitutes.¹² These examples represent the extreme end of a continuum of exploitation, cruelty and violence that poor women face every day.

Poor women’s survival strategies are pathologized and criminalized

Of course, poor women don’t just lie down and take the abuse and degradation. Unfortunately, though, our strategies for survival have been portrayed as crimes or pathologies. Working under the table to supplement starvation welfare rates is defined as fraud; refusing to take harmful psychiatric medications can get you locked up; working on safer, better-lit streets can get you arrested for soliciting. We liken this campaign to the witchhunts of medieval Europe, in which women seen as threats to the status quo were burned at the stake. Now, instead of being burned at the stake, poor women are “burned” by the system.

¹² http://www.walnet.org/csis/news/toronto_96/triplemurder.html

2.2 Articles 6, 7 & 8: Work and Working Conditions The Exploitation of Poor Women

“I was fighting for more shifts and they didn’t like that so they terminated me. They didn’t like older workers, because we tried to organize unions. So they fired us and hired 19-year-olds. And then, because I couldn’t get the extra shifts I needed, I was 24 hours short for E.I. (Employment Insurance). At another job, they paid me \$400 per month for four hours per day, but I had to stay for a fifth hour that they called “lunch” even though I was the only one there and had to answer the phones. After my contract ended, I asked for my Record of Employment (ROE) so I could get E.I. They must have realized that \$400 per month for 25 hours per week was only \$4.00 per hour, much lower than minimum wage, and they might get in trouble. So they put much fewer hours on my ROE, and I didn’t qualify for E.I.”

“When I was working they said I was too slow and I had to speed up. They forced me to work faster even though I couldn’t because of my disability. My supervisor made fun of me, saying, “My dog has thyroid problems.” When I was in the hospital, my employer called the hospital and tried to get them to tell him confidential medical information about me. Because of my disability, I have trouble staying warm. I had to wear a lot of clothes because the heat wasn’t on in the building. They threatened to fire me because of the clothes. I still have threatening letters from the employer.

I was working but getting no pay increases so I couldn’t afford my apartment. Then I moved to a rooming house. But these people were not related to me, not part of my family, not anyone I knew. And if I played East Indian music people were offended—they said there were no East Indian people living there so I should go and live with my own people. They said that because I was working I had to pay more for heat and hydro. When I was in the kitchen people would come in and accuse me of things I hadn’t done. Other people said the landlord sexually harassed them as well. So there were many problems with this house. The rent was too high, there was racism and discrimination, it was untidy, there was too much noise. I complained about these things, but I was told that I had no priority because I didn’t own the house. The landlord ignored my complaints, and said, “You should go live with people of East Indian origin.” I couldn’t live there. They were raising the rent too much. So I applied to the government for housing. But I didn’t have priority.”

“At a factory where my aunt worked for years, they forced her to pay for E.S.L. (English as a second language) and other training as a condition of her employment, and promised to refund it but never did. Also, she lost her seniority when she returned from this mandatory training. She had been there for 15 years! They did this to lots of the Latin American people who worked there. They made them sign contracts they couldn’t read.”

Many poor women are excluded from labour law protection

These testimonies illustrate how poor women—especially women who are migrants, racialized, disabled, and older—are easy targets for exploitation by employers. Though labour laws about working conditions, salaries, and unions exist, they are insufficiently enforced. Often if we attempt to invoke these laws we could be fired. It is also important to note that there are workers in Canada who are not protected by these laws. For example, those of us who are on welfare in Ontario are forced to work in exchange for social assistance, but we are legally forbidden to form unions or to strike, and the social assistance we receive is far below minimum wage. Women admitted to Canada seasonal agricultural workers' program (SAWP) are not covered by the Employment Standards Act and are barred from unionizing.¹³ Finally, many industries in Canada, including the garment industry, rely on the work of non-status migrants— mostly racialized women—who are not protected by any labour laws.

The right to work is connected to the rights to social security, housing, and health

These testimonies also illustrate the interconnections between the right to fair working conditions and other rights under the Covenant, including the rights to social security, to housing, and to health. Because our jobs are more likely to be temporary, part-time, casual, home-based and piecework, we usually don't qualify for Employment Insurance when unemployed.¹⁴ Many FORWARD members have never been able to collect E.I. Meanwhile, when we lack access to social assistance, we must accept any work we can find in order to survive, even work that is exploitative or dangerous.

Women's low wages make adequate housing unaffordable, and leave us vulnerable to exploitation by landlords. We are forced to seek housing in inappropriate places, such as rooming houses that are well-known to be dangerous for women. Low wages and insecure employment also mean that we are unable to leave housing where we are experiencing racial or sexual harassment or abuse. And even when employed, we may not be able to afford housing at all. Many FORWARD members have held jobs while living in homeless shelters.

Finally, the right to safe and healthy working conditions interacts with the right to health. For women with disabilities, requests for accommodation of a disability can lead to harassment or dismissal. In order to maintain our employment, women with disabilities and chronic illnesses must often subject ourselves to working conditions that are harmful to our health.

¹³ SAWP factsheet produced by Justicia for Migrant Workers <http://www.justicia4migrantworkers.org/saw.htm>

¹⁴ In 1994, changes in eligibility requirements for federal unemployment insurance decreased the percentage of eligible unemployed workers from 74% in 1989 to 36%.

2.3 Article 9: The Right to Social Security No Security for Poor & Homeless Women

"I am sixty-three years old. I came to Canada from Italy in 1966, when my son was two years old. I never went to school, so I had to learn from my kids. I never got a job. I raised my kids whole and healthy.

I am living in a house that my husband left me when he passed away. I was 59, my husband was 68, when he died. My daughter was still only a child. We got only \$400 a month. My friend told me not to bother applying for welfare because I owned a house. I have a big problem that the government doesn't give me financial help because I'm not 65. They only give me \$451 a month widow's pension. It started five years ago at \$400 and went up slowly to \$451. There is no money in the bank because the funeral took all the money. The \$451 is not enough to take care of the house. I have to pay property tax six times a year—three months in a row, then another three months in a row. Last year it was \$409 (each month). In July it went up to \$456. In the months that I pay property tax, sometimes my son gives me the balance--\$5. Hydro is too much--\$127 dollars a month sometimes. My house insurance is \$762 for the year. When I'm 65 I can apply for another \$400 (per month). Then I will be rich! I'll be able to pay everything.

When my husband died my (youngest) daughter was only 13. The school board gave her bus tickets to go to school. My husband's brother-in-law would bring food every month because they have a restaurant. For clothes sometimes I get from (a women's drop-in centre).

My (oldest) daughter from America helps me out for water, hydro, etc. because she doesn't want to lose that house, for respect for my husband, for the blood he put into that house. My husband died for that house. Too much work. He worked in construction. Because my daughter from America helps me I can stay above water. Without her I would sink."

Social security rates across Canada are too low

Many NGO reports will undoubtedly describe the inadequacy of social assistance rates across Canada to cover the basic necessities of life such as food and housing. FORWARD members know first-hand about the inadequacy of welfare and disability, and we've experienced homelessness and hunger as a direct result of the low rates of social assistance in Ontario.

Many poor women have no access to social security programs

It is important to note, however, that many poor women do not even have access to social security programs, however inadequate these may be. Poor women, and especially women who have been homeless, often find ourselves in this situation because we fall into gaps between social security programs. In the period covered by this review, such gaps in Canada have grown wider. In the past decade, social security in Canada has transformed from a safety net of universal entitlements to a loose patchwork of programs whose eligibility criteria often exclude those most in need.

The testimony above provides an excellent example. The witness is not old enough to qualify for old age benefits, yet the widow's pension to which she is entitled does not

account for the fact that she is caring for a minor child. Her lifetime full-time work of childrearing is not considered eligible for a pension or income replacement of any kind. As an older woman with no primary education, very little English, and no experience in the workforce, she is not employable. If she were to apply for welfare, she would have to report all the family support on which she relies to survive, or face being charged with fraud. The financial value of this support and of her widow's pension would be deducted from her welfare, leaving her with nothing. Meanwhile, ironically, her greatest expense is taxes, paid to a government that fails to provide for her.

Women who are homeless can't access social assistance

Another gap that is of great concern to FORWARD members and others who have experienced homelessness is the requirement that a person have a permanent address in order to begin receiving social assistance benefits in Ontario. This ridiculous rule also exists in many other provinces and territories. Women who are being released from hospitals and jails with no fixed address, and women who are living on the streets, in shelters, or in places not intended for human habitation, have to get a landlord to sign a "promise to rent" form in order to begin receiving benefits. It is almost impossible to get this letter signed without money to offer as a down payment. Once again, women are made particularly vulnerable by this requirement because of the sexual exploitation that may be the price of the promise to rent. In addition, this requirement alerts potential landlords to the fact that women are currently homeless and applying for welfare, two more strikes against us in competing for tenancy, along with discrimination we may face on the basis of race, citizenship, disability, language, family status, and sexual orientation. Also, if a woman's identification has been lost or stolen while homeless, or if it was not returned upon release by a jail or hospital, she has to replace it before applying for welfare, a process which costs money and takes weeks. Finally, many women—especially mothers, who risk the apprehension of our children if we go into a shelter—keep our homelessness hidden by staying with friends or relatives. When the person providing a woman with temporary shelter is also in receipt of social assistance, it may jeopardize their own benefits if the woman uses their address to begin her claim.

Poor women often don't qualify for Employment Insurance

As noted above, another issue that has affected many members of FORWARD is lack of access to Employment Insurance (EI). Most poor women's jobs do not provide the "insurable hours" required to qualify for EI, even though insurance premiums have been deducted from our paycheques. The massive annual surplus in this program is in part a result of the ineligibility of workers to receive benefits after paying premiums.¹⁵ The existence of this surplus is also in direct contradiction of Article 2, which commits governments to use the maximum available resources for the realization of social and economic rights.

¹⁵ The 2004 report of the Auditor General of Canada to the Standing Committee on Human Resources, Skills Development, Social Development and the Status of Persons with Disabilities, states: "I draw Parliament's attention to the surplus in the Employment Insurance Account. This is the fifth year that we have done so. The surplus reached \$44 billion by March 2003 and continues to grow." Viewed 19 March 2006 at http://www.oag-bvg.gc.ca/domino/other.nsf/html/04hr01_e.html.

The application process for Ontario disability benefits is designed to exclude

Denial by process in applying for Ontario disability benefits is another concern.¹⁶ It is very difficult to navigate this complex and lengthy process while living on an income that is about half of what we would receive on disability benefits. As a result we are forced to subsist with inadequate food and housing and under conditions of stress that may exacerbate our physical or mental health conditions. Routine denial at the first stage of application means that almost all applicants must also go through an appeals process in order to be successful. Because the adjudication process is not transparent, a woman might receive no information about why her application was rejected or what might be required in order to strengthen her claim. Many women with disabilities—especially women who are homeless, who have mental health problems and/or who do not read or speak English—are unable to complete the process within the required timelines and are never able to access the supports to which we should be entitled.

¹⁶ See “Denial By Design,” a report by the Income Security Advocacy Centre, viewed 19 March 2006 at http://dawn.thot.net/denial_by_design.html#8

2.4 Article 10: Protection of the Family Poor Mothers Targeted by Child Protection Agencies

“I came to North America in the early 1980s from (South America). One of my worst moments in Canada was when there was a Christmas party at one of the neighbours’. I was coming in with two of the children and the police were waiting there. They grabbed me by the hair and took my six-month-old grandson. They lied about all of this. The social worker was going so fast she fell and dropped my grandson down the stairs. All through Christmas we didn’t know the fate of my grandson. No-one told us if he was dead or alive. It was a real kidnapping.

I requested a five-bedroom (subsidized housing unit) so that I could get guardianship of my two grandchildren but was denied so I couldn’t qualify to be their guardian. CAS (Children’s Aid Society) has come into my apartment many times and taken my papers, journals and valuables. The CAS workers have told me that they will put me on the street and make me into a bag lady—that I deserve the worst. The allegations of CAS were that we were full-time prostitutes moonlighting as mothers—that we weren’t real mothers. It has been eleven years of physical, emotional and spiritual torture. They have destroyed my whole family, starting with me and ending with my grandchildren.

I am in desperate need of a five-bedroom place because I want to pull what’s left of my family together. My beloved aunt, who raised me, had a heart attack and died when she heard of this situation. I want to bring back my grandchildren. This December it will be two years since I have seen my grandchildren.”

“When I was 21 I got raped, and got pregnant with my daughter. I hid it from my family. I knew the guy. We were partying. I said no. It was very frightening. But I blamed myself, told myself that I shouldn’t have been drinking. So I came to Toronto. I took a bus. I don’t know why I chose Toronto. I didn’t know anybody here. I was on the streets in Toronto. I didn’t have anybody or know anything.

So then I’m tired cold hungry, walking up Yonge St., and the labour pains started. I was very scared. Somehow I found Mount Sinai hospital and the baby was born after 12 hours. The only child I ever had was a daughter. CAS took my child as soon as she was born. I was all alone. So of course I had postpartum depression, and other issues to deal with such as defending myself on the street against attempted physical and sexual assault, and hunger. It is my experience that it is really demoralizing to the spirit when you are homeless, faced with the knowledge that I am walking on land that my ancestors had walked on since time immemorial.

Most of (that year) I was in and out of shelters—it was packed—one night there were six of us on one bunk bed. So I started drinking again, and got in trouble—not with police, just with fighting with men. I woke up one morning with blood splatters all over me. I had no recollection of what had happened. I was in a blackout.

They put me in Queen Street (a psychiatric facility) because they said I was a “drunken crazy Indian.” A nurse there helped me. She said, “Why don’t you go to this program in Beaverton.” It was run by (a women’s shelter). It was the first time in that

vicious cycle that I actually listened to somebody. I listened to myself. If you don't listen to yourself, you're dead. So I got a drive up to Beaverton. I felt very connected there. It was still Mother Earth, even though it wasn't First Nations territory. I stopped drinking there.

The whole time I was fighting for custody of my daughter. On Jarvis Street (Family Court) I lost custody permanently because of my drinking and because I was still in recovery. They didn't give me a chance.

When my child was being taken away I had a flashback of an old newspaper photo I had seen in a review in 1979 of children being taken away to the residential schools. To lose your child does something to your soul.”

Poor women are targeted, not supported, by child protection

Many of the women in FORWARD can testify to the irreparable harm our families have experienced from child protection agencies. These agencies are supposed to investigate *any* allegations of harm to children, but in practice, mothers who are Aboriginal, poor, homeless, racialized, migrants, young, and psychiatrized are vastly overrepresented among those involved with CAS.¹⁷ Child protection agencies are mandated to take whatever action is needed to protect and support a child at risk, but the actions they take rarely include practical support measures to provide the necessities of life, improve the family's living conditions, and support mothers in being the best parents we wish to be. Instead of protecting the child by supporting the family unit, child protection agencies put us under a microscope and make it even harder for us to take good care of our kids. To get our kids back, we are required to meet conditions that are almost impossible without practical and moral support. Other research shows that mothers in British Columbia have the same problems as we have had.¹⁸

The right to protection of the family is related to the right to adequate housing

As the testimonies demonstrate, the right to adequate housing has a complex relationship with the right to protection of the family. Women who are homeless—especially young women—are at very high risk of having our children apprehended at birth. Though the testimony above is of events that occurred decades ago, current child protection practice with young homeless mothers remains the same: more often than not, their babies are apprehended at birth, they are left to cope with the grief and loss while still homeless, and they lose custody permanently because they lack the housing and supports to parent. As also described above, inadequate housing also often prevents family members from obtaining guardianship so that the child can remain in the family.¹⁹ Meanwhile, poor women who lose custody of children also lose access to the social assistance benefits and social housing units associated with the child. It's even more difficult to meet stringent conditions for reunification (which may include an

¹⁷ Young Mothers In/From Care Project, 2001, School of Social Work, University of Victoria.

¹⁸ Kellington, S. (2002) Missing Voices: Mothers at risk for or experiencing apprehension in the child welfare system in BC. Prepared for National Action Committee on the Status of Women. http://www.nac-cca.ca/about/regions/bc/Final_Report2.pdf

¹⁹ Housing is a factor in one out of five cases of child apprehension in Ontario. (Chau, S., Fitzpatrick, A., Hulchanski, J. D., Leslie, B., & Schatia, D. (2001). One in five...Housing as a factor in the admission of children into care. *Centre for Urban and Community Studies Research Bulletin*, 5, 1-6.)

apartment of an appropriate size) while on a dramatically reduced income. Poor women are also at a disadvantage in attempting to fulfill conditions because we cannot afford the time off work, or the transit fare, for attendance at mandated counselling sessions, legal appointments, and child-parent visits.

The child protection system discriminates against poor women

Discrimination in child protection is also a big problem, especially for women who are homeless, Aboriginal, and psychiatrized. Many young women who are homeless have been in State care, and a young woman who is well-known to CAS is much more likely to have her own child apprehended.²⁰ The well-documented mass abduction of Aboriginal children by the Canadian state (also known as the “60’s scoop”) placed many women who are now in their 30s and 40s into State foster care or non-Aboriginal adoptive families.²¹ Many of these women—especially those who were placed in foster care or whose adoption arrangements broke down—now find themselves under increased child protection surveillance as parents. Poor women who are psychiatrized are presumed to be unfit parents due to our psychiatric diagnosis. The conditions for reunification with our children may include taking psychiatric drugs that make us tired, depressed, and unable to function. Why should CAS be able to control what we do with our own bodies?

The child protection system does not serve poor children well

Finally, those of us who were in care as kids know that the child protection system also did not serve our needs as poor children. For example, why did the State place us in care due to abuse by a household member, instead of removing the abusive person from our home? When in care, some of us experienced abuse, a lack of consideration of our needs and culture, and a profound sense of alienation. These negative impacts of State care have contributed to our emotional struggles as adults.

²⁰ Young Mothers In/From Care Project, 2001, School of Social Work, University of Victoria.

²¹ For references on the 60’s scoop see http://www.aboriginalsocialwork.ca/special_topics/60s_scoop/ viewed 20 March 2006.

2.5 Article 11(1): The Right to Adequate Housing Not Every Dwelling Is a Home

"I was born in (South America), and I came here many years ago. I have been experiencing housing problems pretty much since we arrived here. Pretty much we were always living in shared accommodations to make ends meet. My cousins, everybody, they said, "You'll have enough power, now that you're going to Canada." And actually, I couldn't confide in them. When I wrote them letters, I couldn't tell them, "I am homeless." It's like an insult to their dreams or something. I didn't want to crush their expectations.

Anyway, so my family, they never knew until I landed in a shelter here in Canada. I lived in a shelter for four years minus a day. My first shelter was at (a Catholic agency) and they refused to believe I was pregnant. They said, "Yeah, you look a little bit pregnant." The workers humiliated me. That was one of the worst things that happened to me—that they refused to believe that I was pregnant. They were saying that I was pretending to be pregnant so that I could get some compassion, you know people feeling sorry for me, as though I am somebody who likes to mooch for attention or something like that.

They used to put my food in the garbage. The food was horrible. And I was vomiting and feeling more sick, because the baby needed food and so did I! I was six months pregnant, and the doctor told me "I'm scared about your pregnancy." Rather than gaining weight I was losing weight! So I used to go and eat at (my aunt's) place. And then when I came back they knew that I was full. They used to shout at me and tell me, "Oh you must have got a rich pimp, that's why you got fed." So they told me, "You have to get out of the shelter. If you have somebody, you have money, get the hell out of here." They put me outside. It was wintertime, it was January, and they put me outside to sit on the floor. They said, "You have to tell us the truth!" So many terrible things those people did to me in the shelter.

And I tell you, I didn't believe in God, but now I do. Because I was supposed to be dead long time ago. I was supposed to die, in the cold, with my baby inside of me, my son. I was supposed to die in January of 1995. I was supposed to die, freezing outside. And I didn't die, by some miracle."

"I've been thrown out of my home after thirty years because the house got sold. There were some promises made by the new landlord that I could stay as long as I wanted....anyways, long story short, I'm faced with eviction.

After thirty years I just find that it's incredible, you know, to think that after thirty years all you have is two months to look for a place. It's outrageous. Especially being in a position of financial constraints when you're looking at now apartments being like bachelors \$700 and up (from \$500 rent on the current place).

So then of course I went to fight it, to the (Ontario Rental Housing) Tribunal. So, anyway, I'm just talking about how cruel the system is. Section 162 of the Tenant Protection Act, 1997, is the piece that I'd like to see changed. It's one thing for a landlord to say, "I'm moving in" or "My family is moving in" if that is legitimate. But it's another if (they are just claiming to move in so that they can evict the tenant). Nobody does any

investigating, for one. And I really don't think that this clause, this piece, is meant for somebody who is a real estate agent, who owns five properties. Who, you know, has got a huge house in High Park (high-income area of Toronto). I mean, it's just, I don't know. I just don't think it's right.

Well, I found that there's a certain amount of discrimination. And that has to do with the class, and your source of income. Now, if I had money, I would have gotten myself a Bay St. lawyer. I would have got to hire a private eye and have done some investigating. Right? And you know what, I may have won in the first place, because I would have had money to be able to prove, you know? And I myself, if I were investigating them, I could be set up for stalking. But it's all really about, you know, the income."

Poor women across Canada live in conditions of extreme housing inadequacy

These testimonies illustrate the conditions of extreme housing inadequacy—including hidden homelessness, absolute homelessness, and insecurity of tenure—in which poor women across Canada are forced to live. Housing for poor women in Canada is characterized by enforced dependency that is in contradiction to human dignity and worth, the cornerstones of all human rights. Whether poor women live in shelters, private market apartments, social housing, with family or friends, in rooming houses or in group homes, we often find ourselves at the mercy of other people—staff, landlords, cohabitants—who treat us in an exploitative, abusive or degrading manner.

Problems with governments' responses to homelessness: A shelter is not a home

In the period covered by this review, Canada's principal response to homelessness has been through the provision of funding for shelters and other services for people experiencing absolute homelessness.²² Though shelters are a vital resource for women with no place to go, and conditions in some shelters have improved, those of us who have stayed there know that shelters are not housing: the food is sometimes terrible, there's noise all night, things get stolen, and there's no privacy. Sometimes women are treated very badly and humiliated by staff. Women can't stay for very long, and we have to leave during the day. In some shelters the conditions are bad, for example it's cold, it's dirty, or there are not enough showers or toilets or no doors on the toilets. Women can be locked out or "barred" with no place to go. Shelter life is especially bad for pregnancy or if you have a health condition.

²² The major federal homelessness program, the Supporting Communities Partnership Initiative (SCPI), targets funds to ten Canadian municipalities with high rates of homelessness. SCPI funding is available for services for homeless people, including services to help people move into housing, however this funding does not increase the availability of affordable or supportive housing, which most homeless women require in order to be rehoused. During the period of this review, there was no federal funding for new affordable housing (except Aboriginal housing) until the 2001 Federal-Provincial Housing Framework Agreement. However, due to cost-sharing requirements there has been little up-take of these funds in most provinces. For example, in Ontario, only 63 new homes have been built as a result of this funding (National Housing and Homelessness Network 2005 Report Card, viewed 20 March 2006 at <http://www.tdrc.net/05-NHHN-Housing%20Report%20Card.pdf>). In contrast, the waiting list for subsidized housing in Toronto alone stands at about 70 000 households.

No security of tenure for poor women

As illustrated by the second testimony, insecurity of tenure haunts the tenancies of most poor women in Canada. In Ontario, legislation passed in 1997 allows landlords to raise rents on vacant units an unlimited amount, providing an incentive to evict tenants, especially those considered “undesireable” (on the basis of race, source of income, disability, citizenship, gender, age, and family status) and those paying relatively low rents. The same legislation made the eviction process much easier and allowed for landlords to evict tenants without cause if the landlord planned to move into the unit. Tenants may be evicted for non-payment of rent, even after paying back all the rent they owe. These changes have led to steadily increasing eviction rates in Ontario.²³ Some landlords now use the easy-to-obtain eviction notices as a form of harassment, so that even if the eviction is not carried out, tenants live in a state of uncertainty and fear.

Eviction affects mental and physical health

Security of tenure interacts with the right to health, especially for women who have disabilities and who have been psychiatrized. Threats of eviction, the search for housing, and the process of moving are all extreme stressors that destabilize women’s physical, mental and emotional well-being, and may interfere with our ability to work or parent. For example, one FORWARD member who was evicted felt so anxious about it that she needed medication, but the medication also made her sleepy, depressed, and less productive. Eviction may also affect women’s physical health when we are forced to move into accommodations that are more expensive, more crowded, more dangerous, in worse condition, and unhealthier than the place from which we are evicted. This is especially the case for women who are forced to move after living for a long time in a rent-controlled apartment. The woman who testified about her eviction above now has no food money after the first week of the month, once her new higher rent and utilities are paid.

Social housing is vital but it is often substandard, dangerous and degrading

Housing advocates say the government should build more subsidized housing and we agree, but those of us who have lived there know that there are many problems with social housing projects. In some developments, we’re made to feel like a “welfare case” if we go to the management office with a complaint. Many women in social housing are treated with disrespect and racism by our neighbours and by the management. We have experienced violence and intimidation, and the police and security guards refuse to take our situations seriously. Because of the stealing, drugs, violence and weapons in our communities, we live in fear. The buildings are old and falling apart and the government says there’s no money to fix them. Now that the management of public housing has been taken over by private management companies, we believe that they are trying to

²³ For example, in 2005 eviction orders issued by the Ontario Rental Housing Tribunal increased by 9% from the previous year, to 64 864. (see Wellesley Central Pre-Budget working paper, viewed 20 March 2006 at http://www.wellesleycentral.com/ITGUpload/doc/83/ontario_prebudget_backgrounder_2006.pdf). More than half of the households evicted lose their housing by default, because they fail to respond to the Tribunal within the 5-day time limit due to a misunderstanding of the process. This procedure continues in spite of the current government’s 2003 promise to create new legislation, and in spite of a letter of concern from the Ontario ombuds office directing the government to act without delay (see Toronto Star article Feb 15 2004, viewed 20 March 2006 at <http://www.ontariotenants.ca/articles/2004/ts-04b15.phtml>).

get rid of subsidized tenants in some buildings and replace them with tenants paying market rent. Even in subsidized housing, we don't have security of tenure. We worry about being evicted if we draw attention to ourselves through complaints, and some of us have had our privacy compromised by video surveillance and by arbitrary extra checks on our income.

The homelessness of many poor women is hidden

Hidden homelessness—which often takes the form of staying with family or friends—is a reality for increasing numbers of Canadian women. It is particularly prevalent in rural areas where few services exist, in First Nations and Northern communities where there is a grave shortage of housing, and among migrant women whose families often must live in conditions of extreme overcrowding due to extremely low wages and high rents in urban centres.²⁴ Besides placing people in overcrowded conditions, hidden homelessness has other consequences, including the stresses on family relationships that might otherwise provide vital sources of informal support.

Rooming houses are not adequate housing

As shown by the testimony under Articles 6, 7, and 8, living in rooming houses is very hard for women and it's often the only housing a single woman can afford, even if we are working. In rooming houses we face sexual and racial harassment, homophobia, and racist comments about our music or the smell of our food. Like in shelters, sharing space with strangers compromises women's privacy and increases the risk of theft and violence. Rooming houses owners may exploit their power by controlling residents' schedules or guests, and setting other arbitrary and invasive rules. For example, one woman was told by the owner to use a bedpan at night, instead of the toilet. And because there is no regulation of rents on rooms, owners may charge widely varying amounts even among tenants in the same house, getting as much as they can from each resident.

Poor women are abused and exploited in group homes and care homes

Another form of housing that is well-known among women who are homeless but less visible to the general public is group homes—also known as lodging homes and care homes—for people with disabilities, psychiatric survivors, youth in state care, and older people. Though housing advocates rightly call for additional supportive housing, many women who are homeless would never consider living in a group care setting. For those of us who know about group homes through our own experiences or through our work, the reasons are not difficult to understand. In Ontario, privately-run lodging homes—a type of housing women are often referred to if they are moving off the street—receive much more money to house poor women than women would receive themselves if they were on a disability. Homes are paid a per diem top-up per resident (not per room) in addition to the housing and board portion of residents' disability or pension cheques. Residents may be required to share rooms, with up to four persons per room. We have known of many homes that require that residents appoint the home as trustee, and

²⁴ In First Nations communities, housing shortages might be exacerbated when private companies mine, log, or build on land over which title is in dispute, as is now happening at one FORWARD member's community of Six Nations in Ontario for example. <http://ocap.ca/1stnations/sixnations/courtorder>.

disburse residents' monthly incomes as they see fit, often deducting large sums for items such as soft drinks, cigarettes, and shampoo "purchased" from the house. Staff who are often underpaid and undertrained oversee residents of widely varying needs, from frail elderly to people with developmental disabilities to psychiatric survivors. Many homes deliberately overmedicate residents in order to maintain a compliance and quiet. There are documented reports of abuse, deaths, and poor nutrition in Ontario group homes.^{25 26 27}

²⁵ Toronto Star, date n/a, "Adults beaten in group homes: Hundreds of cases may just be tip of iceberg" viewed 21 March 2006 at <http://www.ont-autism.uoguelph.ca/adults.PDF>.

²⁶ Toronto Star, June 20 2003, "Deaths of young people in Ontario institutions," viewed 21 March 2006 at <http://www.namisc.org/News/2003/Spring/MentalHealthDeaths.htm>.

²⁷ Hedley, Tomasick & Woolcott (1994) Nutritional quality of food served in contracted second level lodging homes. *Journal of the Canadian Dietetic Association*, 55 (2), 75-8. Viewed 21 March 2006 at http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=10134918&dopt=Abstract.

2.6 Article 12: The Right to Mental Health Poor Women Harmed By the Psychiatric System

“My first time in the hospital was in my mid-twenties. The first time, I was in hospital for three months. The second time was one and a half years.

I was misdiagnosed with chronic paranoid schizophrenia, and that has upset me very much. The doctors prescribed a lot of medications and I didn't know what they were for. They violated my rights by things they gave me that they weren't supposed to because of the wrong diagnosis. Later when I went to other doctors they diagnosed other illnesses.

I want them to be more sure of diagnoses before giving so much medication. Certain things they gave me, they weren't supposed to, because of the wrong diagnosis. I'm very upset about the wrong diagnosis on my file and about the wrong medications that were given to me.

I was taking calcium pills, thyroid medication, haldol, congenital, chlorpromazine, laxapine. I kept complaining about the medications and refusing to take them. So they sent me to my family doctor and he gave it to me in an injection. I took it for one and a half years. I was all lost in my mind—someone would be talking to me and I would be somewhere else. Right now I'm not taking any medication for that diagnosis. I have been examined by many doctors and nurses and they all say I don't have it. Now they say what I have is anxiety and things caused by my thyroid.

I was forced to stay at the hospital and sometimes police came to get me and took me there.

One of my arms was damaged in the hospital. My calcium was very low. They held my arm very tight to force me to take a drug—to give me an injection. One and a half years later I was working and was in extreme pain with my arm. I didn't know what was wrong. I went to another hospital and they said it had been broken. I still experience pain in my arm all the time. In the 90s I couldn't raise my arm.

I really desire that this diagnosis be removed from my file. I'm concerned that my files contain information that is not true. It's on my mind all the time to get this diagnosis removed from my records. My doctor says there's nothing that can be done. If I die it will still be on my record. I have been to medical records four times and they say it can never be removed because it is on microfilm. I want to get the correct things on my files. I called back an officer of the hospital and he said there is nothing that can be done. I don't know who can help me get it off.”

“People should not be under arrest for living their lives. I had my own life until I was systemized. I was persecuted and hauled away in handcuffs. The (psychiatric) system is the one who threw us out on the street in the first place. We're told, “Conform to society or go in a mental institution.” I feel raped by the psychiatrists. They raped my brain. They took my intelligence and tried to zap it out of my head.”

Poverty affects women's physical and mental health

Poor women in Canada are faced with an array of health problems related to social and economic marginalization. The physical health effects of poverty, homelessness, and racism have been the subject of extensive documentation. These problems are also of great concern to members of FORWARD; however, this report will focus on an area that is unlikely to receive much attention in other reports: psychiatric treatment as a violation of the right to the highest attainable standard of physical and mental health.

Poor women's human rights violated in the psychiatric system

As the testimonies above illustrate, psychiatric diagnosis, incarceration, and medication have a powerful negative impact on the lives of poor women. FORWARD members have experienced abuse and degradation in the psychiatric system, including being physically restrained, forcibly injected, and sexually assaulted. The medications we have been prescribed by psychiatrists or family doctors often make us feel even worse. We do not receive the full information we need to make an informed decision about medication, and often when we complain to our doctors about the unwanted effects of medication, they don't listen. If we refuse to take medication it might be forcibly administered.

Psychiatric labels expose poor women to further discrimination

We are treated in a discriminatory manner by medical professionals, shelter staff, welfare workers, child protection authorities, police, employers and landlords as a result of being labelled with a psychiatric diagnosis. This discrimination, like the label, is often lifelong. In the words of one member, "Once you're labelled, it's for life. Once you're diagnosed, they put you on medications for life. They don't think you can get better." And as can be seen from the first testimony, there are no mechanisms to enable a person to have such a label removed from her medical files, even once it is proven to be false.

Legislation enables increased surveillance and control of psychiatrized women

In the period covered by this report, state surveillance and control of psychiatrized women has increased. In Ontario, as already noted, new mental health legislation has given police, doctors, and family members increased powers to incarcerate a woman in a psychiatric institution against her will. The same legislation has created Community Treatment Orders, binding orders that require people to comply with prescribed psychiatric treatment (usually medication) while living in the community, or be returned to the hospital.²⁸

Women's counselling services are cut while antidepressant prescriptions increase

In Ontario and across Canada, the past decade has seen deep cuts to free and low-cost non-psychiatric services to support the mental and emotional well-being of poor women, such as community-based counselling centres, and counselling programs for women survivors of violence. In the same period, there has been an enormous increase in

²⁸ Szigeti, A. (2001). Ontario's community treatment orders: how did we get here and where do we go now? An advocate's perspective. *Health Law in Canada* 21 (3), 66-83.

prescriptions of mood-altering drugs, especially SSRIs, by family physicians and psychiatrists.²⁹

Psychiatric labels mask the devastation of poor women's lives

Across Canada in the past decade, poor women's lives have been devastated by abuse, violence, poverty, homelessness, hunger, the loss of our children, and the scapegoating we experience every day in society. Then the label of "mental illness" is applied to our basic human reactions to the extreme stress under which we live. Instead of receiving support to empower ourselves, we are subdued with medications. Calling us crazy makes it easier for the public, the media, the government, shelter workers, welfare workers, police, and doctors to disregard our opinions and experiences. The right to an adequate standard of living is fundamental to the right to physical and mental health.

²⁹ Currie, J. (2005). The marketization of depression: The prescribing of SSRI antidepressants to women. *Women and Health Protection*, May 2005. Viewed 30 March 2006 on the Canadian Women's Health Network site at <http://www.whp-apsf.ca/pdf/SSRIs.pdf>

3. CONCLUSION

3.1 Article 1: The Right to Self-Determination Poor Women Are Deprived of Our Own Means of Subsistence

“I mean, I could tell you stories that you are not going to be able to sleep tonight because of the humiliation that we have to go through. Now I know why people live on the street, they’d rather be on the street than in these so-called shelters. Because the social workers are horrible. They treat you like they are doing you a favour. But in time, it clicked on me: if we didn’t exist, people in need, they wouldn’t have a job. It is because of us that they got in there.”

Women’s poverty and homelessness enables the creation of middle-class jobs

Poor women across Canada are kept in a state of dependence. For our income, we are at the mercy of employers who would exploit us, or a social assistance system that would disqualify us or cut our benefits to the minimum possible level. Our families and homes are at the mercy of child protection agencies whose policies discriminate against poor women. In our housing, we are too often at the mercy of shelter workers, landlords, cohabitants, group home staff, and abusive partners. Our emotional well-being is too often in the hands of doctors who don’t listen to us, and who have increasing powers to coerce us to take whatever treatment they deem best. It hasn’t escaped our notice that the people on the other side of these relationships—employers, welfare workers, CAS workers, landlords, shelter workers, doctors—have a much better standard of living than ours. Our poverty, homelessness, marginalization and psychiatrization keep them in business.

Government spending does not reflect poor women’s priorities

Government decisions about expenditures do not include our input and they do not reflect our priorities. It is well-known that shelters cost more than housing, psychiatric treatment costs more than counselling and a healthy diet, State care for children costs more than providing adequate resources to families. Yet government spending in these areas remains oriented towards the systems that maintain State control and poor women’s dependence, instead of promoting our autonomy and dignity.

Poor women’s lives are not for sale

Our lives are not for sale. Through this report, we demand our right to self-determination. We insist that we be included in the decisions that are made about our lives at every level—from the welfare office to government. Financial resources dedicated to improving poor women’s lives should be placed in our hands, not used to perpetuate dependence on professionals and agencies.