

Op-ed: Ontario needs a feminist recovery plan from COVID-19 ^[1]

Women make up the majority of essential workers at grocery stores, in health care, long-term care and child care

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EXCERPTS

When I was a little girl, my mother told me I could be anything I wanted. However, her encouragement came with a caveat. Because I was a girl, a Black girl and a girl from a working class background, I would have to work at least three times as hard to get where some others would just “naturally” land. In this way, my mom – a single parent – gave me my first lesson on a society afflicted by white supremacy and patriarchy.

In March 2020, COVID-19 hit – an unprecedented global pandemic that has exacerbated all existing social ills, and put a spotlight on the many ways our society is unequal.

Women; single parents; Black, Indigenous and racialized people; people who are low-income; and people living with disabilities have been disproportionately impacted by COVID-19 and its economic fallout. The impact on Black, Indigenous and racialized women of colour and low-income women has been especially devastating. The majority of all COVID-19 cases within the general public and among frontline health care workers have been women.

In Toronto, race-based data on COVID-19 confirms that racialized and low-income residents have been hardest hit by the pandemic. Members of the Black community represent 21 per cent of reported COVID-19 cases in the city, despite the fact only nine per cent of Toronto’s population identifies as Black. Households with an income of \$50,000 or less represented about half of reported COVID-19 infections in the city.

We know that women form the face of frontline work, making up the majority of essential workers at grocery stores, in health care and settings like long-term care and child care. The Canadian Women’s Foundation found that about 90 per cent of nurses, 75 per cent of respiratory therapists, 80 per cent of laboratory staff and 90 per cent of personal support workers are women. Many of the latter are Black and immigrant women, who put themselves and their families at risk every day while caring for our loved ones.

Women who receive the Ontario Disability Support Program (ODSP) or Ontario Works (OW) were struggling long before COVID-19. They earn a fraction of what Ontarians receiving CERB get, while living under a government that’s committed to clawing back their earnings, pushing Ontarians with disabilities further down the hole.

By March, 1.5 million women in Canada lost their jobs due to the pandemic, according to RBC’s recent report. Women accounted for 45 per cent of the decline in hours worked. Many women were forced to quit their jobs because of a lack of child-care options available after schools closed down.

Across Ontario, women with children and working families are extremely worried about sending their kids back to school in overcrowded classrooms with poor ventilation and insufficient PPE. The Ford government’s back-to-school plan fails the most basic test: keeping students and teachers safe by following the recommendations from our public health officials. Some teachers, fearing the worst, have even been drafting and tweaking their wills.

Women have been the loudest voices in the room, desperately pushing the government for changes to prevent a second wave of the COVID-19 virus in the fall.

Ontario is currently in stage 3, but the Ford government has yet to address the urgent child-care needs across the province. One operator in my riding has said that, without government supports, child-care fees could increase by as much as 400 per cent for a family of two children. That is unacceptable.

The average family – let alone one-parent households, of which 80 per cent are women led – cannot afford these absurd costs.

The YWCA’s recent report *A Feminist Recovery Plan For Canada* presents a detailed plan to tackle systemic barriers and improve economic security for women, two-spirit and gender-diverse people. It calls for more paid sick days for everyone, paid family leave and paid re-training and professional development for workers. The first point of the report calls for an intersectional, gender-based analysis on the impacts of COVID-19 when writing and crafting recovery policy. I couldn’t agree more.

Ontario needs an urgent intersectional feminist response from all governments to ensure our recovery centres the most marginalized. We must address systemic anti-Black and anti-Indigenous racism and make justice and equity a top priority for Ontario's post-pandemic recovery. We must strengthen our social safety net and recognize the gendered, racialized and classed impact COVID-19 has had on families first.

We need an intersectional, gender-based analysis on the impacts of all new laws and budgets governments put forward, with full transparency to the Ontario public. This was the basis of the Intersectional Gender Equity Strategy motion I tabled in the Ontario Legislature last December. To date, my motion has not been acknowledged by the Ford government.

Ontario's post-pandemic recovery must include – to name a few things – investment in public education and child care, more affordable housing, legislated pay equity to address the gender pay gap and investment and reform to ODSP and OW. Without an intersectional feminist recovery, the yawning inequities in our society – which existed long before COVID-19 – will only get worse.

Jill Andrew is the MPP for Toronto-St. Paul's and the Ontario NDP Women's Issues & Culture Critic. She will participate in the panel discussion A Feminist Recovery For Ontario with the YWCA and the Canadian Women's Foundation on August 25 at 2 pm.

Region: Ontario ^[3]

Tags: gender ^[4]

economic recovery ^[5]

Source URL (modified on 26 Aug 2020): <https://childcarecanada.org/documents/child-care-news/20/08/op-ed-ontario-needs-feminist-recovery-plan-covid-19>

Links

[1] <https://childcarecanada.org/documents/child-care-news/20/08/op-ed-ontario-needs-feminist-recovery-plan-covid-19>

[2] <https://nowtoronto.com/news/ontario-feminist-recovery-plan-coronavirus>

[3] <https://childcarecanada.org/taxonomy/term/7856>

[4] <https://childcarecanada.org/category/tags/gender>

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