



DisAbled Women's Network of Canada

Réseau d'action des femmes
handicapées Canada

DAWN Canada

Recommendations on the UN ICERD

Recommendations on the Draft Outline for the Preparation of Canada's 24th and 25th Reports on the *International Convention on the Elimination of All Forms of Racial Discrimination (ICERD)*

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Submitted by
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August 12, 2022

ABOUT THE DISABLED WOMEN'S NETWORK (DAWN) CANADA

The DisAbled Women's Network (DAWN)Canada is a feminist, cross-disability, human rights organization that works to address systems of oppression. DAWN Canada's focus is on addressing issues of disability through our four fundamental pillars of research, education, policy and advocacy. We amplify the voices of women and girls across the gender spectrum through an intersectional lens.

DAWN Canada's mandate is to end the poverty, isolation, discrimination and violence experienced by women and girls with disabilities and Deaf women living in Canada. DAWN Canada also promotes the advancement and inclusion of women and girls with disabilities and Deaf women by creating change at a systemic level. As a result of our longstanding advocacy in these areas, DAWN Canada has significant knowledge about the intersections of race, gender, and disability and the experiences that result from the overlapping forms of discrimination and oppression.

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Our Understanding

As a party to the United Nations (UN) *International Convention on the Elimination of All Forms of Racial Discrimination* (ICERD), Canada is required to report on a periodic basis to the UN on its domestic implementation of the provisions under the Convention.

Presently, the Government of Canada is seeking the views of civil society organizations, Indigenous representatives, and human rights commissions on their draft report outline. This report will be Canada's combined twenty-fourth and twenty-fifth periodic report of the ICERD, which was initially due for submission to the Committee in November 2021. Due to the impact of the COVID-19 pandemic, Canada and the UN have lacked capacity to advance reporting priorities.

We welcome the invitation to provide our views on the draft outline and strongly emphasize the importance of the current consultation. It is critical that Canada's submission is rigorously reviewed by civil society organizations and Indigenous representatives who can provide their expert perspective on the progress that Canada is making to eliminate all forms of racial discrimination.

Our Recommendations

1. Apply an intersectional lens to your analysis of racial discrimination in Canada

Overall, DAWN Canada is concerned by the lack of intersectionality in the proposed draft outline. An intersectional lens takes into account not only race, but also ethnicity, class, gender identity, sexual identity, disability, socio-economic status, geographic location and other factors which affect the lived experiences of Canadians and people living in Canada. An intersectional approach to the collection and analysis of demographic data must be a priority to understand, prevent and eliminate racial discrimination.

According to Statistics Canada, 24% of women in Canada live with a disability and women with disabilities are more than twice as likely as women without disabilities to be victims of violent crime. The risk of violence increases for women and girls with disabilities who are Indigenous, Black, racialized, immigrant or refugee, and/or lesbian, gay, bisexual, transgender, queer, intersex or two-spirited, or living in rural areas. The rate of disability among Indigenous women is upwards of 35%. Indigenous women in Canada between the ages of 25-54 are twice as likely as non-Indigenous women to report having a disability.

The prevalence of disability among Indigenous populations in Canada should be included Section 4 as part of Canada's report on efforts to eliminate anti-Indigenous racism and discrimination against Indigenous Peoples, including the violence that causes disability

(interpersonal violence, environmental racism, conditions on reserves, etc.) and the impacts from a lack of disability supports available and accessible to Indigenous populations. Social determinants of health, including racism, sexism, and institutional violence are determinants of disability.

The research tells us that violence and discrimination often happen at the intersection of various and multiple forms of oppression and marginalization. We echo our civil society partners, OCASI and Colour of Poverty, Colour of Change, in their calls for Canada to mandate the collection of disaggregated data across all Ministries, Departments and relevant institutions in order to improve their ability to identify and address the impacts of racialization in an intersectional way. In order to eliminate racial discrimination, Canada must be able to identify who is most at risk as well as how to address the compounding impacts that are the result of multiple forms of discrimination.

2. Reconsider use of the term “ethnocultural groups” to describe racialized groups

DAWN Canada questions the total absence of the word “race” in a document on the elimination of racial discrimination. Similarly, “racism” is only used once (in a single reference to “anti-racism”) in preference for the terms “racial discrimination” and “racist hate crimes” which are used throughout. The term “racialization” is also completely absent from the discussion. We recommend that these decisions are reconsidered so that race is properly centred and distinct forms of racism (such as anti-Black racism, anti-Indigenous racism, and Islamophobia) can be identified and addressed.

This is most pronounced in Section 3, titled “Ethnocultural Groups,” which describes Canada’s intention to address the “ethnic composition of Canada’s population, as well as provide an overview of economic and social indicators of the country’s ethnic minority groups, Indigenous peoples and non-citizens, and the representations of these groups in public and political life” (3). We caution that the terms “race” and “ethnicity” should not be used interchangeably, since their meanings are distinct. Race is a social construct that was created to categorize people into groups based on shared visual traits and primarily skin colour. Ethnicity refers to a person’s cultural, linguistic, heritage, ancestry, and/or religious identity, and differs from nationality since someone who is ethnically Igbo or Yoruba can also be Nigerian and/or Canadian. Race and ethnicity often intersect in the sense that a Black person can be ethnically Igbo or Yoruba but they are distinct because not all Black people have the same ethnic identity.¹

¹ <https://www.publichealthontario.ca/-/media/documents/ncov/he/2021/03/aag-race-ethnicity-income-language-data-collection.pdf?la=en#:~:text=Race%20is%20a%20social%20and,may%20include%20practices%20and%20language>

DAWN Canada recommends that this section be renamed “Racialized and Ethnocultural Groups” and that the focus be on race and the various intersections (ethnicity, gender, disability, etc.) that shape racialization and racial discrimination. We further suggest that anti-Black racism, anti-Indigenous racism, Islamophobia and other specific types of racism are named and accounted for in Canada’s discussion of the progress made to eliminate racial discrimination.

3. Include Health as a specific subject area for inclusion in Section 3 and Section 4

In both Sections 3 and 4, specific subject areas and their corresponding Concluding Observations (COs) have been identified for inclusion. Section 3 pertaining to the discussion of Ethnocultural Groups includes the following subject areas: demographic context, education, employment equity, racist hate crimes, and the situation of migrants, refugees, and asylum seekers. Section 4 pertaining to Indigenous Peoples includes the following subject areas: federal strategies, violence against Indigenous women and girls, socio-economic issues for Indigenous people on- and off-reserve, and consultations with Indigenous Peoples.

Given the prevalence of racial discrimination in Canada’s healthcare sector, DAWN Canada strongly recommends that health and healthcare are included as a specific subject area in both sections (CO16; CO19; CO25; CO33).

Canada has a long history of forced and coerced sterilization that has impacted First Nations, Inuit and Metis communities, Black communities, and those with intersecting vulnerabilities related to poverty, race, and disability. While these eugenicist policies are no longer legal, the impacts are not confined to our past but continue to shape racist and discriminatory attitudes in healthcare settings today, and forced and coerced sterilization unfortunately continues to be practiced.²³

Following the Quebec coroner’s report on the death of Joyce Echaquan in 2020 which ruled that racism played a role in her death, we recommend that Canada provides a focused update on progress made to eliminate anti-Indigenous racism in the healthcare system. This should include an update on its legal obligations under Jordan’s Principle to

² : <https://bccfp.bc.ca/about-us/news/canadian-senate-releases-report-on-forced-and-coerced-sterilization-of-persons-in-canada/#:~:text=Canada%20has%20a%20long%20history,to%20poverty%2C%20race%20and%20disability.>

³ https://dawnCanada.net/media/uploads/page_data/page-64/more_than_a_footnote_research_report.pdf

resolve and eliminate the service inequalities for First Nations children in Canada's healthcare system.

These are just a few examples that demonstrate the deep impacts of racism in Canada's healthcare system that must be addressed in this report. Other potential areas of discussion include the intersections of race and mental health, sexual and reproductive rights, and Medical Assistance in Dying (MAiD).

4. Focus on the systemic issues that render racialized and ethnocultural groups more vulnerable to COVID-19 in the Annex

Racialized health inequities were further exposed during COVID-19. Disaggregated data on exposure to and contraction of COVID-19 among essential and front-line workers is needed to better understand the impact on racialized groups.⁴ Some studies in Canada have already demonstrated among hospitalized patients, a higher percentage identified as racialized and that care work (paid and unpaid) is occupied by racialized women, which greatly increased their exposure to COVID-19.⁵

These realities not only speak to how vulnerable predominantly women and racialized front-line workers are, but also to how this crisis has rendered both racialized women and women with disabilities more vulnerable to COVID-19 and how Canada's response to the pandemic has left them vulnerable. Canada must include some discussion of COVID-19 in both sections on health as well as addressing the impacts of the pandemic on Indigenous peoples and racialized groups in Canada in the Annex.

5. Focus on *addressing, preventing and eliminating* racial discrimination in the criminal justice system

Section 5 on Justice "intends to address Canada's efforts to prevent racial discrimination in the criminal justice system" (5). The focus on *preventing* racial discrimination is not adequate given the deep prevalence of racial discrimination across the system. How is Canada addressing the harm caused by decades of racial discrimination in our justice system? It is not enough to prevent it from happening in the future when it is so prevalent

⁴ Additionally, incarceration and various forms of congregate living remain a critical issue with respect to women with disabilities and COVID-19. See more at:

https://dawnCanada.net/media/uploads/page_data/page-63/parliamentary_brief_fewo_covid_19.pdf

⁵ https://dawnCanada.net/media/uploads/page_data/page-63/parliamentary_brief_fewo_covid_19.pdf

both historically and presently. Canada must address the harm caused by racial discrimination and eliminate it from the system altogether.

This is a critical issue that is impeding Canada's progress on the elimination of racial discrimination, given the overrepresentation of Black and Indigenous people at all levels of the justice system⁶. Furthermore, the incidence of traumatic brain injury (TBI) and other disabilities amongst Canada's incarcerated population is an indictment on the ability of both our health system and our criminal justice system to properly identify and treat disability.⁷ The intersecting and compounding forms of discrimination at work across the health sector and criminal justice systems must be addressed.

Summary

In summary, DAWN Canada recommends that Canada's report on the ICERD approaches understanding, preventing, and eliminating racial discrimination through an intersectional lens. Disability must be included, as a large portion of the population in Canada lives with a disability; and racialized women are the most impacted.

We recommend that the section "ethnocultural groups" is renamed "Racialized and Ethnocultural Groups"; Canada cannot eliminate racial discrimination without talking about race. Race and ethnicity are not interchangeable terms.

DAWN Canada recommends that the report includes health as a subject area in Section 3 and 4. Racial inequities exposed in COVID-19 demonstrates the need for Canada to mandate disaggregated data.

Finally, Canada must move beyond talking in terms of preventing racial discrimination and focus on addressing and eliminating systemic racial discrimination and violence in Canada, as it is present.

⁶ Canadian research highlights the role of prisons in incarcerating Indigenous people and people with psychiatric disabilities. See more at: Ware, S., Ruzsa, J., & Dias, G. (2014). It can't be fixed because it's not broken: Racism and disability in the prison industrial complex. In *Disability incarcerated* (pp. 163-184). Palgrave Macmillan, New York.

⁷ In terms of the incarcerated population in Canada, burgeoning research around women with TBI indicates a high percentage of women offenders with this condition. See more at: Durand, E., Watier, L., Lécu, A., Fix, M., Weiss, J. J., Chevignard, M., & Pradat- Diehl, P. (2017). Traumatic brain injury among female offenders in a prison population: results of the FleuryTBI study. *Brain and behavior*, 7(1).