

# Equity and Inclusion Advisory Committee

## Equitable Recovery Subcommittee

### Agenda

**Monday, August 23**

#### **Electronic Participation at 5:30 to 7:30 pm**

As part of the City's commitment to safety during the COVID-19 pandemic, this meeting will be held electronically.

This Meeting may be viewed online at [www.stcatharines.ca/youtube](http://www.stcatharines.ca/youtube)

**Public Comments:** The public may submit comments regarding agenda matters by contacting [jrorison@stcatharines.ca](mailto:jrorison@stcatharines.ca) by Friday, Aug. 20 before 3:00 p.m. Comments submitted will be considered as public information and entered into public record.

#### **Members:**

Haley Bateman (Equity and Inclusion Advisory Committee)  
Rashmi Biswas (Anti-Racism Advisory Committee)  
Liam Clarke Coward (LGBTQ2S+ Committee)  
Matthew Goodman (Accessibility Advisory Committee)  
Emily Kovacs (Equity and Inclusion Advisory Committee)  
Gail Riihimaki (Older Adults Advisory Committee)

#### **Staff Liaison:**

Julie Rorison

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1. Call meeting to order (Chair)
2. Recognition of Traditional Territories (Chair)
3. Amendments to Agenda
4. Motion to approve agenda
5. Motion to adopt the minutes of Aug.16, 2021 meeting
6. Declarations of Interest

7. Discussion of Draft Covid Recovery Plan (Appendix A)
- Objective of the meeting is to review the draft and recommendations on the following topics as it relates to the City's responsibilities and services with the following in mind to structure final report:
- Item and explanation
  - Research (including any statistics)
  - Relationship to the City's Strategic Plan (social and economic)
  - Intersectional Approach (how they relate/are connected to other items)
  - methodology (the approach to closing the existing gaps)

Member topics:

- Gail: Public Access to Technology, food banks, neighbourhoods
- Haley: Childcare, volunteers
- Liam: Technology, access to internet, and health impacts
- Rashmi: Housing
- Emily: racism and discrimination
- Matthew: public engagement and outreach
- Julie: housing and homelessness

8. Date of next meeting: Monday, Sept. 30 at 5:30 pm

9. Motion to Adjourn

## Introduction

The City Of St.Catharines engaged with the Equity Advisory Committee to examine how the COVID recovery plan is impacting members of equity seeking groups, and more specifically individuals represented by the leadership of the equity advisory table (women, newcomers, BIPOC, members of the LGBTQ2S community, individuals living in marginalized conditions, persons with cognitive and intellectual disabilities and those who are neurodiverse) are managing during the COVID-19 pandemic. This letter reflects a collective request based on relevant literature review and input from leadership of the above equity seeking groups as a means of gaining valuable insights into their experiences in the community.

What we heard from leaders of equity seeking groups:

Through the literature review as well as input from leaders in other municipalities such as Ottawa and Toronto, more preventative actions could be taken by the City of St.Catharines to ensure the wellbeing of its residents during the pandemic, specifically paying greater attention to the cohort with aging individuals with a combination of language, technology and literacy issues, accessibility, developmental and cognitive and neuro-diversities.

Reflective of to the larger population, the first and unequivocal theme was related to feelings of isolation and a lack of mental health supports. Without access to daily routines outside the home, many individuals felt increased levels of loneliness, only complicating their experience being a member of an equity seeking group further. Research and narratives indicate that social isolation has been compounded by fear of the virus and anxiety around personal safety.

Affordable housing has been a major issue for the equity seeking community for decades. The waiting list for provincially funded supportive housing is decades long and we know it's not new. In Niagara alone, over 3500 individuals are waiting for a roof over their head and the wait lists range from 5-18 years for housing. The lack of supportive housing options and the disproportionate poverty rate among this population has contributed to significant overrepresentation of equity seeking people in the violence against women and shelter system, hospitals, jails, judicial system, and recovery centres. What was a housing issue has now mutated into a public-health crisis due to the well-documented dangers of housing insecurity during the COVID-19 pandemic. We know that Niagara is actively seized of this matter, including through a partnership with the federal government on unit creation through the National Housing Strategy (NHS). In keeping with commitments in the strategy to create new units for our population, we recommend that the city of St.Catharines advocates that 10% of the Niagara housing stock to be allocated for each of the equity seeking groups through the NHS and be earmarked specifically to support equity seeking members all across Niagara.

Leaders also reflected that members highlighted increased levels of food insecurity during these times. Individuals normally travelling to get groceries, they no longer feel safe going long distances to access food and the added stress of lineups and hygiene procedures make the shopping experience more difficult. Members reliant on food banks have also had to go without access to this service as some locations have been shut down or had restricted hours. This created a ripple effect as people from equity seeking communities are paying more out of pocket for a free service that they previously accessed. The request is to see food banks reopened and expanded and additional supports to allow for a safe shopping experience.

For many of the individuals, coop opportunities, precarious or continuous employment and volunteer positions help with their sense of self-worth, engagement and feeling of belonging in the community and most have not been able to return to these positions in person after COVID started. The sense of purpose that individuals gained from these roles played a large part in their success, and without it many feel increased levels of low self-esteem, boredom and isolation. They are eager to return to their roles and would like the city to direct more

funds to businesses, organizations and social enterprises that employ equity seeking members so that they may feel more supported in their safe return to work. A solution to this would be the city's leadership on a social procurement policy where employers who hire members of equity seeking groups are given first priority for contracts for both the City of St. Catharines as well as the Region of Niagara as a whole.

Furthermore, although the individuals are eager to participate in any paid or unpaid employment opportunity, they do not have adequate access to technology or proper digital literacy training. Participants are recommending that the city provide those receiving supports with access to internet, technology, and the corresponding education to increase engagement and online literacy. This is a valuable skill that many are going without, and therefore individuals are unable to engage with their supports and participate in programming in a way that is important for their wellbeing. As indoor interactions are limited or not currently allowed, individuals have resorted to outdoor activities and socializing. In many cases, people noted that these spaces were not AODA compliant based on their accessibility needs.

People from equity seeking groups are typically struggling with social isolation already pre-COVID, (higher rates of poverty, inadequate social and physical activity programming region wide, no access to timely public transportation, employment, health, recreation, etc.) access to community spaces and recreational centres is extremely important. Further to this, a worry among many was that public bathrooms would not be safe for use and that this would be an issue should they wish to spend time outdoors. An additional recommendation from participants was that the City of St. Catharines should publish a list of outdoor activities and locations that are accessible to all, and that bathrooms should be a high priority to promote safe outdoor social interactions and have staff who are trained in crisis de-escalation on transport routes as well.

To ease many of these concerns, our participants recommended creating more plain language information to be shared in the community. While some of the individuals are hearing about COVID-19 responses from neighbours and community members, others are resorting to news outlets and intermittent internet publications, based on where free wi-fi is available. When information is available, very few are delivered in an accessible way, and only in English, and as a result some of the individuals are experiencing an information overload in a language they cannot comprehend. Moving forward, to allow to participate equitably, the City of St. Catharines as well as the region of Niagara should enforce mandatory training for city and regional staff about augmentative communication methods and devices so that equity seeking members can access all city and regional services independently and with dignity. Individuals should not have to rely on paid staff, parents, care givers to access city services because of communication barriers. Currently the City of St. Catharines offers translation services (print and language), but there is very little knowledge and support for people who must use an augmentative communication system to access other city services and this needs to be corrected.

We are pleased to see that access to affordable child care for members of all advisory bodies are being implemented and commend the city for its leadership on removing barriers for parents with young children to participate in their civic responsibilities. We would like to continue to ask that the city continues to advocate for affordable, coordinated, quality and nationally available child care not only under COVID, but beyond, as we know that also has a compounding impact on individuals, specially women's ability to be meaningfully engage in society.

#### Recommendations:

1. Accessible Housing:

The city of St. Catharines to advocate with the Niagara Region Housing to allocate 10% of all resources allocated through the NRH be earmarked specifically to support each individual equity seeking group as identified being on a housing waitlist.

2. Food Security:

3. City of St.Catharines to advocate for all available food banks to be reopened or extended hours and additional supports to allow for a safe experience with proper PPE .
4. The City to create a social procurement policy where businesses from equity seeking groups would be offered first priority for city and regional contracts and more designated spots for equity seeking groups are regulated through the city's procurement process
5. The City of St.Catharines and the Region of Niagara should publish a list of outdoor activities and locations that are accessible to all, and that bathrooms should be a high priority to promote safe outdoor social interactions.
6. Accessible Transportation and trained frontline city employees to better recognize those in crisis to be able to support these individuals should an issue arise in all city facilities and city property.
7. Information related to COVID-19 shared in plain/accessible language as well as multiple languages.
8. Provide free downtown public space access to internet, technology, and the corresponding training to members of equity seeking groups.
9. The City of St.Catharines to continue to advocate for a national, coordinated, affordable child care strategy.
10. The City of St.Catharines to advocate and address the disproportionate health risks faced by Indigenous community and equity seeking groups;
  - a. Prioritize the "5 Cs" frontline workers for steady and reliable access to PPEs and vaccines when made available. Also advocate to prioritize community organizations that work with vulnerable communities.
  - b. Develop equity-based risk assessment frameworks and tools that can assess the recovery needs of members from Indigenous community and equity-seeking groups, with special attention to those living with homelessness, persons with disabilities, persons living with mental health diseases and addictions, rural women and seniors who may not have equitable access to health services.
  - c. Establish an effective monitoring system to accompany lifting restrictions to services and ensure that cases in communities are eliminated and not simply left with ongoing illness when most of the community spread is contained.
  - d. Overall, evidence shows that race, gender, ethnicity and socioeconomic status are closely related to rates of infection, hospitalization, and death. Collected/used COVID-19 data by the city needs to be disaggregated along these lines to ensure equitable recovery efforts.
11. Build equity and resilience in decision-making frameworks for social service recovery;
  - a. Establish resilient and equity-based service systems that can adapt to changing needs of equity seeking groups, using lessons from successfully recovering in Canada and the world. Recovery plans and protocols that are flexible and based on transformative strategies can help absorb second and third wave COVID-19 pressures.
  - b. Factor COVID-19 equity impact and data in City's mid-term and long-term plans and strategies and put mechanisms in place to continue monitoring this impact.
  - c. Use gender and equity-based analysis when developing criteria for relaxing stay-at-home orders. This includes being aware of the complex needs of vulnerable parents and workers, especially women.
  - d. Design measures that will prioritize Indigenous and equity-seeking families to access green and open spaces, including cooling and warming areas, summer camps and activities, with no cost for families facing economic hardships.

- e. Build-in support measures to allow sustainability of “soft” service providing organizations and explore means to support joint partnerships with the City and sharing of operational costs with bigger organizations to secure funding.
- f. Establish equity-based funding programs that support grassroots groups (targeted to Indigenous, racialized, and disabled girls and youth) to allow initiatives and non-formal groups to access financial support.
- g. Embed Indigenous and diverse cultural strategies in the design of the recovery phase and open the door to Indigenous, racialized and immigrant youth and women to lead local initiatives.
- h. Equity data generated from diverse sources (municipality, community partners and service providers) is essential in order to yield a real-time picture of lived experiences, health needs and resources of Indigenous community and equity-seeking communities. Equity sensitive indicators such as gender, race, immigration status are indispensable for monitoring signals of COVID-19 social and economic rebound.
- i. Be conscious of subtle forms of racism, gender stereotyping and stigma that may become more apparent after quarantine measures are relaxed. Build the capacity of staff to identify these as early as possible, as well as identify discrimination or stigma which cause exclusion of Indigenous and equity-seeking communities.

12. Address the needs of social service work force using gender and equity lens;

- a. Build in flexibility in offering services such as childcare and work from home options. Many vulnerable parents and workers may show reluctance to resume use of services because of illness, fear of contracting illness or because they are caring for their own families that become ill.
- b. Integrate mental health supports for social service providers when planning and implementing recovery efforts. Build in ways for staff to provide input regarding their needs and concerns.
- c. Cross-train staff and create tools with easy explanations of the tasks of essential jobs, to build team and agency resilience.
- d. Reshaping of volunteerism in the recovery phase is essential. Examples include neighbor to-neighbor programs and Indigenous culture education campaigns. Build in supports for older adults to resume volunteering activities.

13. Apply an equity lens to employment, re-employment and economic recovery;

- a. Base business resumption plans and protocols on equity and gender analysis to ensure that the disproportionate impact of COVID-19 is recognized and addressed. When and where data is not available, seek best practices from other jurisdictions and implement ways to maintain a gender and equity lens throughout recovery efforts.
- b. Engage small businesses owned by women, members of racialized and Indigenous communities, and immigrants to identify unique challenges to safe and prompt re-opening and impact of maintaining/relaxing quarantine measures. This can take place through surveys and group discussions.
- c. Assess impact of layoffs and legal leave on Indigenous and equity-seeking members of City staff. Use these findings of these assessments when planning for staff deployment/redeployment during recovery.
- d. Develop risk assessments to measure workers/businesses most impacted by COVID-19 emergency measures and assess representation of equity seeking groups in businesses and jobs most impacted economically.
- e. Use Neighborhood Equity Index and other related databases to develop proxy indicators to which neighborhoods have been impacted more severely economically by COVID-19. Prioritize small businesses and workers in neighborhoods with a preponderance of equity seeking populations.

14. Ensure equitable public engagement and innovative outreach.

- a. Enhance resource-based collaboration and networking that moves away from need-based support towards resilience and agency-based partnerships of equity seeking populations.
- b. Sustain virtual stakeholder tables and partner taskforce groups formed during emergency phase to enable long-term representation of equity issues in the recovery phase. Engage community partners and allies in dialogue on the most effective ways to engage members of equity seeking populations in City plans and strategies safely during the recovery phase. This will set the foundation for sustained collaboration long after the pandemic is over.
- c. Examine how technology can be leveraged to better orchestrate intersectional engagement of communities, distribution of resources, and collaborations with trusted community organizations.
- d. Use equity and culturally sensitive approaches as education campaigns continue around COVID-19. Make public computers available to allow increased access to online based information and engagement.
- e. If face-to-face engagement activities and events with members of equity seeking groups are to resume in the future, address issues concerning trust, transportation, mobility, and distance to ensure participation of diverse local communities. This includes use of fully accessible sites and safe space set-up where masks, sanitizers, physical distancing seating are available.
- f. Develop clear, consistent, and accessible protocols on face-to-face meetings and public meetings and engagement until all restrictions are lifted etc.

#### Conclusion:

As we know, members of equity seeking groups have been disproportionately impacted by the COVID-19 crisis and will continue to experience these effects even after the pandemic is over. Hearing from the leadership of those who are directly impacted along with evidence-based action plans will help our governments and community leaders to respond effectively and plan for rebuilding a city that is inclusive of everyone. It is worth mentioning that recommendations 10-14 were directly accessed with permission from the City of Ottawa after their city council endorsed all of the recommendations and committed to implementing them.

We would like to thank the City of St.Catharines for the opportunity for equity seeking groups to contribute to the report by sharing their experiences and providing recommendations. The Equity Advisory Committee would be pleased to continue this conversation as a partner in rebuild and recovery efforts.