Executive Summary

The 2021/2022 Gender Equality Report Card assesses the Government of British Columbia's track record on gender justice over the past two years by asking: What actions has the government taken? Where is government action overdue?

The Report Card is a deep dive into economic security and access to healthcare. Barriers to economic security and access to healthcare took on heightened significance due to the ongoing impacts of COVID-19. These issues disproportionately impact people who experience intersecting oppressions based on gender, Indigeneity, race, (dis)ability, class, family status, and other aspects of their identity and experience.

To produce the Report Card, we worked with communities and advocates across BC to identify issues and to "grade" the BC government in 13 key areas related to economic security and access to healthcare. We are grateful to our three community partners and their members who engaged in dialogues with us ("community dialogue participants") to provide invaluable guidance throughout this project: the 2Spirit Collective at Urban Native Youth Association (UNYA), the Trans Luncheon Club at PACE Society, and the Society for Narcotic and Opioid Wellness (SNOW).

AT A GLANCE

BC Gender Equality Report Card 2021/2022

Economic Security



Healthcare



This Report Card summarizes some key actions taken by the BC government from January 2021 to November 2022. The actions we profile are those that relate most directly to the concerns expressed by community dialogue participants as well as community partners who reviewed and contributed to this report. We encourage communities to use this Report Card in creative ways, as a tool for education, advocacy, and accountability on human rights and gender justice issues in BC.

Economic Security

This Report Card grades BC's actions and inactions on economic security by focusing on six key issues: access to fair work, financial supports, housing and homelessness, child care, public transportation, and access to social services.



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Access to Fair Work

While BC has taken some positive action to advance gender equality in work by legislating paid sick leave, making unionization easier, and increasing the minimum wage for liquor servers to the general minimum wage, many women and people who are marginalized based on gender continue to face barriers to accessing fair work. BC has not taken robust action to protect migrant and racialized workers, gig workers, and sex workers. As costs of living rise, fair pay for workers is lagging and there has been no progress on moving forward with a living wage for all workers. BC's actions to support employment and education opportunities are insufficient to meet the scale of the need expressed by community dialogue participants.

Financial Supports

Although BC has made some investments to increase financial support, they were minimal compared to greatly increased costs of living. Community dialogue participants highlighted that the pace of BC's investments was too slow, lacking the urgency needed to tackle poverty in BC. Additionally, BC has yet to remove the spousal cap on disability assistance, a restrictive and harmful policy. The province also needs to remove administrative barriers to accessing financial support – a recommendation called for by advocates and experts such as the Basic Income Panel.

D Housing and Homelessness

Despite some important housing investments and actions, BC failed to act in proportion to the urgency and magnitude of the province's multiple housing crises. While targeted investments in supportive, "complex care," and/or SRO housing for those facing homelessness sound like progress, community dialogue participants emphasized that the conditions in many of these units are so abysmal, these investments should hardly count as "action." Investments in transition and second stage housing for women and survivors of gender-based intimate partner violence have also fallen far behind during this period of escalated violence and need. And, despite heightened stigma, displacement, criminalization, and violence experienced by unsheltered people in public spaces across BC, the province has failed to add social condition as a prohibited ground of discrimination to BC's Human Rights Code.

B Child Care

With federal funding support, BC made historic investments in child care – including major fee reductions, doubling \$10aDay child care spaces, and delivering wage enhancements for Early Childhood Educators. These actions are a momentous "win," reflecting the communityled Roadmap to \$10aDay Childcare put forward by child care advocates across BC. Continued investments are needed to meet long-term child care targets, to fairly compensate child care professionals, and to achieve inclusive access to culturally safe programs that meet the diverse needs of all children and families in BC.

C Public Transportation

While some action has been taken to improve access to transportation, these actions are still insufficient to meet transit needs and gaps across BC. Women and people who are marginalized based on gender in Northern BC face unique transportation needs and challenges. Additional resources are needed to support safe transportation in these rural and remote communities. BC's decision to make transit free for children 12 and under is impactful but excludes all youth. More action is also needed to ensure transit is accessible and affordable for families and people experiencing poverty.

C Social Services

BC has made some investments in social services, including new funding for Community Living BC, a pandemic recovery fund for nonprofit organizations, and funding for settlement organizations. However, continued investments are required, especially for sex workers, trans, and Two-Spirit people. BC must ensure that targeted services are available so that no one is left behind.

Healthcare

We grade BC's actions and inactions on healthcare in seven areas: accessibility of healthcare; racism and gender-based discrimination; mental health care; care for people who use substances; trans and Two-Spirit affirming care; reproductive justice, sexual health, and menstrual care; and expansive and wholistic care.

C Accessibility of Healthcare

BC made some important investments in key areas of public healthcare. However, primary care and staffing shortages remain at crisis levels – drastically reducing healthcare access throughout BC. More transformative changes are needed to make up for the decades of underfunding that have eroded BC's public healthcare systems. These changes include the expansion of community health centers and global funding models alongside other equity-focused, upstream, integrative, and evidence-based approaches.

Racism and Gender-Based Discrimination in Healthcare

BC's initial and/or partial actions in this area are overshadowed by a series of more substantive inactions and even harmful actions that fail to uphold fundamental human rights to healthcare. Actions to date "have not meaningfully disrupted the status quo"¹ of pervasive racism and genderbased discrimination in BC's healthcare systems.

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Mental Health Care

BC announced significant investments in mental health services. But our community partners shared that these promised improvements have not yet made a difference. People who are most impacted by systemic health inequalities still face the highest barriers to accessing mental health care. BC has also failed to address significant human rights harms caused by multiple coercive and punitive practices that persist within mental health and prison systems.

Care for People Who Use Substances

BC announced significant investments to address the ongoing drug toxicity crisis. However, government responses to this crisis have, in the words of one community reviewer, "not been led by people who use drugs and... have not incorporated their experiences and perspectives in comprehensive or meaningful ways."2 Responses rooted in stigma and paternalism continue to block progress on harm reduction and safe supply. Youth have inadequate access to harm reduction and have been excluded from decriminalization policies. The intersectional and gendered aspects of the drug crisis, including the experiences of Indigenous women and people marginalized based on gender, have not been adequately acknowledged or addressed.

Trans and Two-Spirit Affirming Care

While BC has taken limited steps to address the stigma that many trans and Two-Spirit people experience when accessing healthcare, more must be done to educate all health care workers about providing care to trans and Two-Spirit people. Barriers to accessing gender-affirming care continue to be a serious concern. Recent changes that remove the requirement of physician consent to change one's gender designation are a step forward but have at the same time created administrative barriers that have harmed trans and Two-Spirit people's access to some healthcare services.

P Reproductive Justice, Sexual Health and Menstrual Care

Across BC, access to reproductive, sexual health, and menstrual healthcare remains deeply unequal. Many women and people who are marginalized based on gender face serious barriers to accessing an abortion in BC. BC's silence with respect to reports of the forcible sterilization of Indigenous people is concerning. BC is reviewing period poverty but has taken minimal action to ensure menstrual care is free for all who need it. Further, the lack of provincial health coverage for egg/sperm freezing, assistance in becoming pregnant, and prescription contraception deepens inequities in access to reproductive healthcare.

D Expansive and Wholistic Care

BC has not taken action to ensure that meaningful, sustainable, and accessible wholistic health and wellness services are available to Indigenous people across BC. Community dialogue participants and reviewers resoundingly reported insufficient action to address longstanding health inequities which impact the ability of people to access a continuum of quality care.