COVID-19 has clearly exposed and exacerbated pre-existing health inequities for Indigenous women and gender-diverse people. The pandemic has created dire situations requiring decolonizing and reconciliatory responses from all levels of government. Responses must ensure the protection of Indigenous women, girls, and gender-diverse people. This includes increasing health and socioeconomic supports during and after the pandemic.
EXECUTIVE SUMMARY

It has been globally recognized that Indigenous communities are the most vulnerable to contracting viruses. Malnutrition, a lack of clean water, and inadequate health care services have led to health inequities for many Indigenous people.

Vulnerable populations, such as those with underlying medical conditions such as chronic respiratory diseases, experience further complications from the virus. Indigenous communities are more vulnerable than other populations, as they are already more likely to suffer from tuberculosis and other respiratory illnesses.

In Canada, COVID-19 has served to highlight the inequalities that exist in the health care sector. Indigenous women continue to be over-represented by negative health statistics due to the legacy of colonization, discriminatory policies, and gaps in the current system. COVID-19 has further highlighted the lack of access issue that remote Indigenous communities face. Poor housing and the difficulty in attaining supplies both contribute to an inability to prevent the spread of the virus in these communities.

Physical distancing and lockdown measures have also reduced formal and informal supports and heightened the mental health and social challenges, including domestic violence, faced by many Indigenous women and gender-diverse people. These circumstances have been compounded by communication gaps due to connectivity issues, such as limited Internet. These conditions combine to magnify the vulnerabilities and isolation of Indigenous women and gender-diverse people.
NWAC’S ROLE

The Native Women’s Association of Canada (NWAC) is actively working with its Provincial and Territorial Member Associations, Elders, and youth to keep Indigenous women and gender-diverse peoples connected and supported.

NWAC’s Resiliency Lodge in Chelsea, Quebec, offers in-person and virtual Elder-led supports and facilitates healing through virtual workshops on a range of topics including violence prevention. The Resiliency Lodge also provides navigational support for legal and social services for women and gender-diverse individuals impacted by violence.

As a member of Indigenous Service Canada’s (ISC) Indigenous Women’s Wellness Advisory Committee, NWAC raises awareness of Indigenous women, girls, and gender-diverse people’s COVID-19-related health priorities. We also advocate for their needs.

On March 29–30, 2021, NWAC organized and held the Summit of the Americas on Violence Against Indigenous Women and Girls to discuss strategies and best practices in countering the blight of violence impacting Indigenous women, girls, and gender-diverse people internationally. This high-profile event brought together several hundred Indigenous women from North and South America as well as leading representatives from the United Nations and Organization of American States (OAS), including the UN Special Rapporteur on the Rights of Indigenous Peoples, the Secretary General of the OAS, and the President of the Inter-American Commission on Human Rights.

NWAC advocates for the unique needs of incarcerated Indigenous women and gender-diverse people. This advocacy work includes issuing multiple press releases and a letter to the Minister of Justice on the need to protect incarcerated Indigenous women and gender-diverse people from COVID-19. We also published an article in the Canadian Journal of Public Health on applying an Indigenous and gender-based lens to the exploration of public health and human rights implications of COVID-19 in Canadian correctional facilities.

GOVERNMENT OF CANADA’S ROLE

The federal government’s approach has consisted of distributing personal protective equipment such as N95 masks, other medical gear and hand sanitizers to Indigenous communities.
As of March 8, 2022, ISC had shipped 2,246 orders for personal protective equipment to First Nations communities. ISC also helped to deploy 710 nurses and 491 paramedics to First Nations communities.

In addition, ISC sent more than 631 mobile structures to communities, of which 469 have been delivered to 142 communities. Of the remaining structures, 76 were deployed to communities to support fly-in and road-access communities. The federal government has also provided additional resources to ensure the continuity of routes into Indigenous communities.

Funding has been made available to address immediate needs in Indigenous communities through the Indigenous Community Support Fund, which totals over $1.8 billion and has targeted housing, education, childcare, and long-term care services.

The government has committed a total of $100 million in COVID-19 emergency relief funding to organizations focused on gender-based violence. This funding is to ensure continuity of services at women’s shelters, sexual assault centres, and other organizations providing such services during this challenging time.
RECOMMENDATIONS

1. The Government of Canada must act to implement all 231 Calls for Justice from the Final Report of the National Inquiry Into MMIWG.

2. The Governments of Canada must act upon all 94 Calls to Action from the Truth and Reconciliation Commission of Canada.

3. We urge all governments to ensure that Indigenous women, Two-Spirit, and gender-diverse people have access to culturally safe, good quality health care close to home, regardless of status or geographic location.

4. All levels of government must ensure that shelters, social workers, and first responders who serve Indigenous women are well supported so they can adequately respond to issues of violence against Indigenous women.

5. The Government of Canada must act quickly and transparently to release incarcerated Indigenous women to reduce their risk of COVID-19 while simultaneously reassessing the processes in which an individual is deemed eligible for release. This means addressing the systemic racism inherent to this process.

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CONSULTED RESOURCES


