

BGCFS EQUITY AND RECONCILIATION STATEMENT ON COVID-19

We would like to thank frontline workers and supervisors for the leadership that they have shown in service to our children, youth, families and communities so far during the COVID-19 pandemic. As we continue to implement agency and public health guidelines, compassionate leadership in the face of the outbreak is critical in ensuring that children, youth, families and communities feel safe and supported.

During times of crisis, organizations often find it difficult to resist the urge to focus their energies, time and resources inwardly to protect the integrity and continuity of their operations, staffing complement and service provision which can lead to the work of equity being sidelined. It is during times of hardship and uncertainty that the work of equity needs to be centred, more than ever, and openly discussed. We need to think and act proactively to assist and advocate with the families we serve, and the communities of which they are a part, to reduce barriers and work towards equitable outcomes.

“Child welfare is the work of equity; the two are inseparable! If you are not doing the work of equity; you’re not doing the mandated work of child welfare.”

*~A Proactive Equity-based Social Determinants of Health Child Welfare Approach to COVID-19,
Simcoe-Muskoka Family Connexions*

Marginalized peoples and communities, indigenous people and communities, those who are impoverished, those with varying (dis)abilities, racialized communities, Jewish people and those who belong to the 2SLGBTQ+ communities may experience heightened vulnerability and discrimination during the COVID-19 crisis. Stigmatization hurts both those who are experiencing the stigma, as well as those who are behaving discriminatorily by creating anger, fear and uncertainty that is targeted towards individuals and groups rather than focusing on the pandemic.

The province of Ontario has [one of the highest incidences of Hate Crimes in Canada](#). Discriminatory incidents that are motivated in any part by bias, prejudice or hate based on race, national or ethnic origin, language, colour, religion, sex, age, mental or physical disability, sexuality identity or expression, or any other similar factor is considered a hate crime under the Criminal Code of Canada, [hate propaganda laws](#) and the Ontario Human Rights Code.

The stress of social/physical isolation measures, employment interruptions, or financial pressures may lead to increased conflict in households. It may also lead to risk factors that are associated with higher rates of intimate partner and sexual violence, such as alcohol use. With authority figures (e.g. public health and political leadership) giving consistent messages to stay home, women may face barriers to accessing shelters, emergency services and medical attention. Families we serve are faced with isolation

and children are not visible in schools and community activities that once provided an avenue for referrals. We are concerned that during the pandemic there is a lack of access to justice for vulnerable people so that children and adults who are already at risk now face another major barrier to securing their safety.

We recognize that the child protection system has contributed to systemic oppression of marginalized people since prior to COVID-19 and these ingrained patterns continue during the pandemic. We can already reflect that some of our responses during the pandemic have been oppressive. We must acknowledge the concern that suspension of in-person visits for children in out of home care reduces the meaningful contact that children have with family and personal support systems and removes opportunities to disclose potential maltreatment. Although actions were taken with the best of intentions, in order for us to learn we will take this opportunity to reflect on the biases in our decision-making and the impact of our actions.

It is important that we continue to keep relationship-building at the heart of our service delivery – sustaining our relationships with families, children and youth, collaterals, and colleagues to maintain human connection. Making sure that our choice of words and the questions we ask do not marginalize those affected by COVID-19 is critical in gaining their trust. Our goal is always to ensure that children feel safe and secure in their homes. With the death of George Floyd at the hands of police, and the ensuing civil unrest, we are reminded again that systemic racism is real in North America. Working with those living at the margins calls on us to understand the cumulative way different forms of discrimination affect people at this time.

Proactive equity-based interventions are not only the right thing to do, they will also help to prevent the need for more intrusive child protection responses which could place staff and families at greater risk of exposure to COVID-19. This approach to working with equity-seeking families is to address service and outcome disparities and not to categorize equity-seeking individuals and groups in order to predict who might cause harm to themselves or others during the pandemic. It is important that we continue to collect identity-based data and have discussions with families about how their identities impact their ability to access our service and other services due to systemic failures.

BGCFS has issued a call to action to staff to remember to continue to centre the safety of children and issues of intersectionality in all of their work during this pandemic. Staff are encouraged to proactively check in with families and children/ youth in out of home care around social determinants of health such as income, food, housing, social isolation, and identity considerations so we can act to reduce barriers.

~ BGCFS Equity and Reconciliation Committee

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