



HOUSE OF COMMONS
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CANADA

A LIFETIME OF DEDICATION

HELPING SENIOR WOMEN BENEFIT FROM THEIR LIFELONG CONTRIBUTIONS TO CANADIAN SOCIETY

Report of the Standing Committee on the Status of Women

Karen Vecchio, Chair

JUNE 2019
42nd PARLIAMENT, 1st SESSION

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**Karen Vecchio
Chair**

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NOTICE TO READER

Reports from committee presented to the House of Commons

Presenting a report to the House is the way a committee makes public its findings and recommendations on a particular topic. Substantive reports on a subject-matter study usually contain a synopsis of the testimony heard, the recommendations made by the committee, as well as the reasons for those recommendations.

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THE STANDING COMMITTEE ON THE STATUS OF WOMEN

has the honour to present its

SEVENTEENTH REPORT

Pursuant to its mandate under Standing Order 108(2), the Committee has studied the challenges faced by senior women with a focus on the factors contributing to their poverty and vulnerability and has agreed to report the following:

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SUMMARY

In recent decades, life expectancy has increased around the world. In Canada, the proportion of seniors in the population is increasing faster than any other age group. In the 65 years and older age group, there are more women than there are men. Women also live longer than men on average, by several years.

Although women tend to live longer than men in Canada, their senior years may be different from those of men because of challenges related to poverty and vulnerability. Senior women are more likely than senior men to live with low incomes. Senior women can face health and wellness difficulties, as well as discrimination, abuse and gender-based violence that may not be experienced by senior men.

Recognizing that senior women in Canada face specific challenges, and that these challenges can be harmful to their quality of life, the House of Commons Standing Committee on the Status of Women (the Committee) held hearings between February and May 2019 on the factors contributing to senior women's poverty and vulnerability in Canada.

Witnesses told the Committee about many factors that can affect diverse groups of senior women's financial security, health and wellness, and experiences of discrimination and gender-based violence. The Committee's report describes the main factors that were highlighted by witnesses that have an impact on senior women's quality of life, including:

- the gender wage gap;
- women's tendency to participate in part-time and unpaid work, including caregiving;
- women's longer life expectancy compared to men, which can lead to greater physical challenges and financial insecurity;
- the lack of accessibility and availability of affordable housing and transportation;
- lack of funding for home care and community-based supports;
- the high cost of medication, especially when combined with the costs of other basic needs including food and housing;

- social isolation; and
- discrimination and gender-based violence.

The Committee's recommendations are intended to support diverse groups of senior women's health and quality of life as they age by providing guidance to the Government of Canada on measures that could be implemented to address the factors contributing to senior women's poverty and vulnerability.

The Committee believes that any approach to ensuring healthy aging and a good quality of life for Canada's seniors must include the intersecting perspectives of diverse groups of senior women and must respect senior women's rights to independence and autonomy. The Committee's recommendations include proposals related to senior women's income and financial security; access to affordable housing; social isolation; health and access to health services; and experiences of discrimination and gender-based violence.

LIST OF RECOMMENDATIONS

As a result of their deliberations committees may make recommendations which they include in their reports for the consideration of the House of Commons or the Government. Recommendations related to this study are listed below.

Recommendation 1

That the Government of Canada continue to address the pay disparities between men and women in the workforce by placing a priority on pay equity and ensuring more financial security for women later in life. 19

Recommendation 2

That the Government of Canada ensure that current support and tax credits for caregivers are meeting the needs of families caring for seniors. 19

Recommendation 3

That the Government of Canada, with the goal of ensuring a financially secure retirement for everyone in Canada and recognizing the value of unpaid caregiving work, create provisions like the drop-out from Employment Insurance in the Canada Pension Plan and/or tax benefits for individuals who stay at home to care for family members, including for those who do so full-time, to participate meaningfully in this contributory program; the definition of caregivers should include spouses, children, grandchildren, and Indigenous Elders. 19

Recommendation 4

That the Government of Canada consider making changes to the Guaranteed Income Supplement (GIS) and Old Age Security (OAS) program to improve senior women’s economic security, such as:

- **ensuring that senior women who are financially vulnerable, including those who are newcomers to Canada, are aware of and have access to OAS; and**
- **examining extending GIS benefits of a deceased recipient to a surviving spouse for a few months to allow the surviving spouse to restructure their personal finances. 20**

Recommendation 5

That the Government of Canada examine the development of a Seniors Entrepreneurship Program (possibly through the Women Entrepreneurship Strategy) and provide supports and services to older women to start their own businesses or develop particular skills. 20

Recommendation 6

That the Government of Canada consider removing the requirement for mandatory minimum withdrawals from Registered Retirement Income Funds that comes into effect at the end of a person’s 71st year to ensure that seniors who choose to work past the age of 70 or who have other sources of income are not required to make the minimum withdrawals. 20

Recommendation 7

That the Government of Canada examine disability-related benefits and tax measures to ensure that persons living with disabilities are not penalized financially for increasing the number of hours they work in paid employment. 20

Recommendation 8

That the Government of Canada continue to apply a gender-based analysis plus lens to the development of all policies and programs related to seniors, and develop programs to address the specific needs of minority women and members of the Lesbian, Gay, Bisexual, Transgender, Queer and Two-Spirit community..... 21

Recommendation 9

That the Government of Canada work with the National Seniors Council and other stakeholders, including women, to develop a national seniors strategy that addresses the needs of Canada’s senior population, ensures the equitable provision of supports and services across the country, and considers the unique needs of women, minority groups and the Lesbian, Gay, Bisexual, Transgender, Queer and Two-Spirit community. 21

Recommendation 10

That the Government of Canada continue to ensure that the specific housing needs of seniors are addressed and prioritized through the National Housing Strategy, with consideration for the intersectional needs of groups such as women, minority communities and members of the Lesbian, Gay, Bisexual, Transgender, Queer and Two-Spirit community, and gather data to close the knowledge gap on senior women living alone..... 23

Recommendation 11

That the Government of Canada continue to support the National Seniors Council to increase awareness and understanding of the social isolation of seniors, and continue the increased funding for the New Horizons for Seniors program to support seniors-driven projects to combat social isolation and help seniors, including senior women living in rural and remote communities and immigrant women, to continue to participate fully in the community. 26

Recommendation 12

That the Government of Canada, as part of the government’s investment in transportation infrastructure, work with provinces and territories to address the lack of transportation options for seniors living in rural and remote communities. 26

Recommendation 13

That the Government of Canada continue to include lesbian, gay, bisexual, transgender, queer and two-spirit older and aging individuals in intersectional research that previously only involved women. 27

Recommendation 14

That the Government of Canada ensure that government-supported research and study of aging and seniors issues apply a gender-based analysis plus lens to gather better data to help guide more informed policy decisions. 27

Recommendation 15

That the Government of Canada, in collaboration with provinces and territories, ensure equitable access for all seniors to hearing health care and assistive devices, and work with appropriate agencies to increase public awareness to prevent hearing loss, to identify and manage hearing loss and to destigmatize hearing loss. 29

Recommendation 16

That the Government of Canada continue to build on Canada’s National Dementia Strategy and the work of the Ministerial Advisory Board on Dementia to ensure Canada is tackling the increasing level of dementia in Canada’s aging population. 29

Recommendation 17

That the Government of Canada develop a strategy to combat the issue of malnutrition for seniors and encourage access to healthy and nutritious food. 29

Recommendation 18

That the Government of Canada develop culturally specific and appropriate multilingual support services specifically for older women and support the development of orientation programs to help older women and their families navigate the complexities of the justice, immigration and health care systems. 30

Recommendation 19

That the Government of Canada continue to develop initiatives to promote healthy aging for women, including physical programs and mental health support programs..... 30

Recommendation 20

That the Government of Canada provide funding to ensure access to services that meet the mental health needs of diverse groups of seniors, including members of the Lesbian, Gay, Bisexual, Transgender, Queer and Two-Spirit communities, as well as women living with disabilities and Indigenous women, and work with provincial and territorial governments to ensure that diverse groups of seniors have access to safe spaces in health care settings. 32

Recommendation 21

That the Government of Canada pursue options to help seniors and Canadians with the high cost of prescription drugs, including a national pharmacare program, and ensure that the development and implementation of a national pharmacare plan takes into consideration the specific needs of senior women, including financial barriers from out-of-pocket payments for medication..... 33

Recommendation 22

That the Government of Canada, in collaboration with the provinces and territories, examine issues of diversity in access to home and community care, with particular consideration for the unique needs of diverse senior women, to ensure that their specific home and community care needs are met. 34

Recommendation 23

That the Government of Canada work with Northern and Indigenous communities to improve access to culturally sensitive and appropriate long-term, residential and palliative care facilities in their communities, and work to ensure that, when Elders must leave their community for care, they have access to culturally appropriate food and community support. 34

Recommendation 24

That the Government of Canada examine the experience of other countries that have appointed either a seniors’ advocate or seniors’ ombudsman, and whether this office would be beneficial in Canada. 37

Recommendation 25

That the Government of Canada recognize the issue of ageism that exists in our society and adversely affects the senior population and develop a strategic campaign to work to end this stigma in Canada. 37

Recommendation 26

That the Government of Canada develop programs to raise awareness of elder abuse and ensure that seniors are aware of the resources and support that are available to them. 37

Recommendation 27

That the Government of Canada work with its provincial and territorial partners to ensure that culturally and age-appropriate services, including shelters and transition houses as well as legal aid, are available for all senior women who experience any form of violence, regardless of where they live..... 38



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INTRODUCTION

Canadians are living longer, and the proportion of seniors¹ in the Canadian population is increasing faster than that of any other age group. Women are disproportionately represented among the 65 years and older age group, as shown in Figure 1, and outlive men, on average, by several years.² Women born in the 2014-2016 period have a life expectancy of 84 years, compared to 79.9 years for men.³

Although women tend to lead longer lives than men in Canada, senior women are more likely than senior men to live with low income, which affects the quality of their lives. Certain groups of senior women, such as Indigenous women, may be particularly vulnerable to live with low income.⁴ Beyond income-related challenges, senior women can encounter difficulties related to health and wellness, as well as discrimination, abuse and gender-based violence that may not be experienced by senior men.

1 The term “seniors” is used by the Government of Canada and is therefore used by the Committee in this report. The Committee uses the term to describe individuals in Canada aged 65 years and older, unless otherwise indicated. The Committee acknowledges that the term “seniors” can sometimes carry ageist connotations.

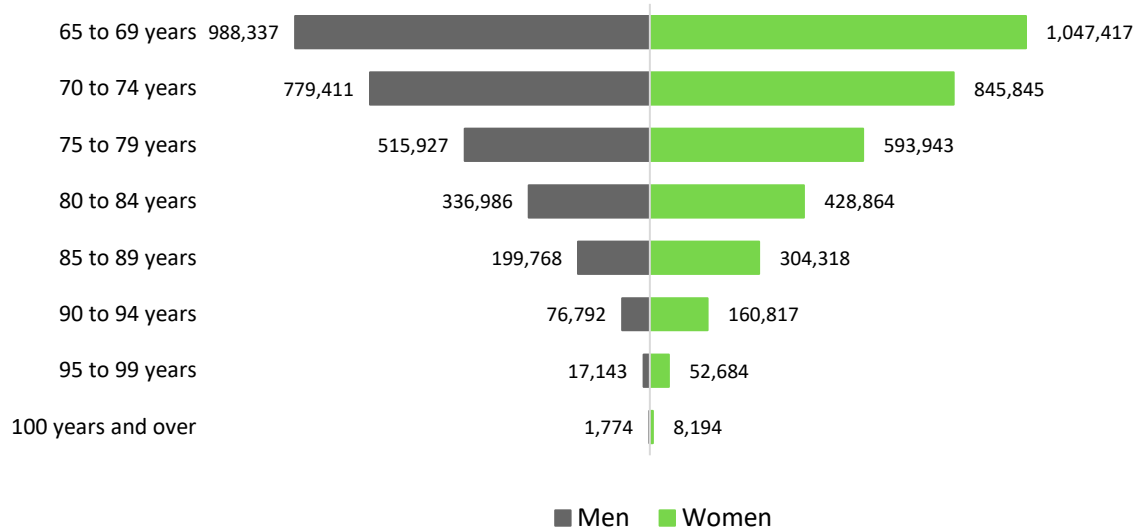
2 House of Commons Standing Committee on the Status of Women (FEWO), *Evidence*, 1st Session, 42nd Parliament, 21 February 2019, 0950 (Anne Milan, Chief, Labour Statistics Division, Statistics Canada); and 1035 (Sébastien Larochelle-Côté, Editor-in-chief, Insights on Canadian Society, Statistics Canada).

3 Statistics Canada, “[Life expectancy and other elements of the life table, Canada, all provinces except Prince Edward Island](#),” *Table 13-10-0114-01*, accessed 18 April 2019.

4 FEWO, *Evidence*, 1st Session, 42nd Parliament, 21 February 2019, 0945 (Danielle Bélanger, Director, Strategic Policy, Policy and External Relations Branch, Department for Women and Gender Equality).



Figure 1 - Number of Men and Women Aged 65 Years and Over in Canada, by Age Category (1 July 2018)



Source: Figure prepared using data obtained from Statistics Canada, "[Population estimates on July 1st, by age and sex](#)," Table: 17-10-0005-01 (formerly CANSIM 051-0001), accessed on 3 May 2019.

Recognizing that senior women in Canada face specific challenges, and that these can negatively affect their quality of life, the House of Commons Standing Committee on the Status of Women (the Committee) agreed on 19 June 2018 to undertake a study on the factors contributing to senior women’s poverty and vulnerability in Canada. The Committee adopted the following motion:

It was agreed, — That, pursuant to Standing Order 108(2), the Standing Committee on the Status of Women undertake a study to examine the challenges faced by senior women with a focus on the factors contributing to their poverty and vulnerability, including, but not limited to:

- Access to transportation;
- Access to health services and medication;
- Cost of home and health services;
- Access to affordable housing;
- Access to justice; and
- Widowhood.

That the Committee conduct this study over the course of eight meetings, report its findings to the House, and request a government response to its report.⁵

The Committee received testimony from 54 witnesses, 10 of whom appeared as individuals, 11 as representatives for five federal departments and agencies, and the remainder representing 18 organizations. The Committee was briefed by officials from Statistics Canada, the Public Health Agency of Canada, the Department of Employment and Social Development, the Department for Women and Gender Equality, and the Canada Mortgage and Housing Corporation. The testimony was received during nine meetings between 21 February and 2 May 2019. Finally, 24 individuals and organizations provided written briefs and speaking notes to the Committee. Appendix A includes a list of all witnesses and Appendix B includes a list of all submitted briefs.

The Committee's report provides an examination of senior women's financial security, health and wellness and vulnerability to discrimination and gender-based violence.

Witnesses presented factors that can contribute to senior women's poverty and vulnerability, as well as to their loss of autonomy. The Committee's report describes the main factors highlighted by witnesses, including:

- the persistence of the gender wage gap;
- women's tendency to participate in part-time and unpaid work, including caregiving;
- women's longer life expectancy compared to men, which can lead to greater physical challenges and financial insecurity;
- the lack of accessibility and availability of affordable housing and transportation;
- insufficient funding for home care and community-based supports;
- the high cost of medication, particularly in combination with other basic needs including food and housing;
- social isolation; and,
- discrimination and gender-based violence.

5 FWO, [Minutes of Proceedings](#), 1st Session, 42nd Parliament, 19 June 2018.



The Committee believes that any approach to ensuring healthy aging and a good quality of life for Canada’s seniors must include the intersecting perspectives of diverse groups of senior women and must respect senior women’s rights to independence and autonomy. In addition to gender, senior women’s poverty and vulnerability are affected by various aspects of intersecting identities; “women with disabilities, [I]ndigenous women, ethno-cultural minority and immigrant women, and LGBTQ⁶ women experience unique challenges as they age.”⁷

The Committee’s report and accompanying recommendations are intended to provide guidance to the Government of Canada on measures that could be implemented to address the factors contributing to senior women’s poverty and vulnerability. The Committee members would like to thank the witnesses who offered their knowledge, ideas and insights to the Committee during its study.

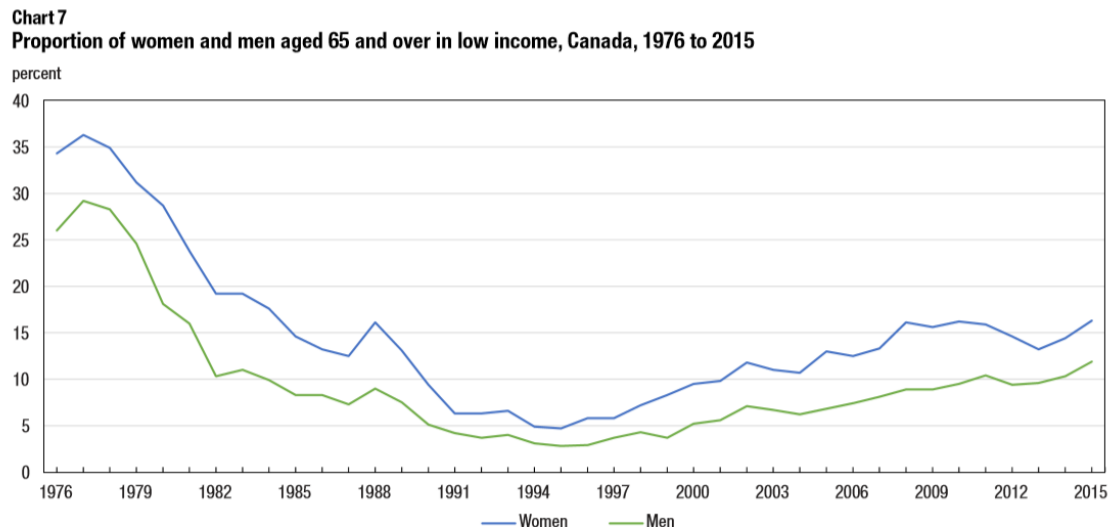
6 Lesbian, gay, bisexual, transgender and queer.

7 FEWO, *Evidence*, 1st Session, 42nd Parliament, 2 April 2019, 0945 (Krista James, National Director, Canadian Centre for Elder Law).

INCREASING SENIOR WOMEN’S ECONOMIC SECURITY

Poverty among seniors in Canada has decreased significantly over the past decades, including for senior women.⁸ However, senior women remain more likely than senior men to live on lower incomes and to live in poverty, as shown in Figure 2.⁹

Figure 2 – Proportion of Women Men Aged over 65 years in Low Income (1976 to 2015)



Note: Estimates exclude territories and First Nations reserves.
 Low income measures (LIMs), are relative measures of low income, set at 50% of adjusted median household income. These measures are categorized according to the number of persons present in the household, reflecting the economies of scale inherent in household size.
 Estimates are based on data from the following surveys: the Survey of Consumer Finances (SCF) from 1976 to 1992, a combination of the SCF and the Survey of Labour and Income Dynamics (SLID) from 1993 to 1997, the SLID from 1998 to 2011 and the Canadian Income Survey (CIS) beginning in 2012. For more information, see Statistics Canada, 2015, "Revisions to 2006 to 2011 income data", *Income Research Paper Series*, Catalogue no. 75F0002MIE - No. 003. Also, two previous revisions of income data are described in Cotton, Cathy, 2000, "Bridging Two Surveys: An Integrated Series of Income Data from SCF and SLID 1989-1997", Statistics Canada, Catalogue no. 75F0002MIE - No. 002, and Lathe, Heather, 2005, "Survey of Labour and Income Dynamics: 2003 Historical Revision", Statistics Canada, Catalogue no. 75F0002MIE - No. 009.
Sources: Statistics Canada, Canadian Income Survey, Survey of Labour and Income Dynamics, Survey of Consumer Finances, 1976-2015, custom tabulation.

Source: Dan Fox and Melissa Moyser, PhD, "[The Economic Well-Being of Women in Canada](#)," *Women in Canada: A Gender-based Statistical Report*, 89-503-X, Statistics Canada, 16 May 2018, p. 15.

8 Women Focus Canada Inc., "[Dr. Oluremi \(Remi\) Adewale – Women Focus Canada](#)," *Submitted Brief*.
 9 See for example: FEWO, [Evidence](#), 1st Session, 42nd Parliament, 4 April 2019, 0850 (Katherine Scott, Senior Researcher, Canadian Centre for Policy Alternatives); and FEWO, [Evidence](#), 1st Session, 42nd Parliament, 28 February 2019, 0855 (Luce Bernier, President, Association québécoise de défense des droits des personnes retraitées et préretraitées); and FEWO, [Evidence](#), 1st Session, 42nd Parliament, 30 April 2019, 0850 (Michael Udy, President, Seniors Action Quebec).



Senior women's experiences of vulnerability and poverty are affected by various identity factors such as ethnicity, immigration status, disability, sexual orientation and gender identity and indigeneity.¹⁰ For instance, certain groups of senior women, such as immigrant and Indigenous women as well as women living alone or with non-family members, are at higher risk of living below the poverty line.¹¹ The Committee was told that although senior women are not a homogenous group, senior Indigenous women share common experiences that affect them as a group: colonization, residential schools, the Sixties Scoop and discriminatory policies that affect health and wellbeing.¹²

Senior women's poverty "is often a function of events occurring across their lives"¹³ and is not related to age alone.¹⁴ Witnesses highlighted several challenges women face throughout their lives that can affect their economic security as seniors:

- Women have lower lifetime employment earnings than men: women generally earn less than men throughout their lives, in part because of the gender wage gap and because women disproportionately occupy lower-paid or part-time jobs.¹⁵
- Women are at a double disadvantage since they earn less than men over their lifetimes and they live longer than men, on average, thus having to provide for themselves for a longer period of time with lower incomes and smaller savings compared to men.¹⁶

10 Canadian Centre for Elder Law, "[Brief](#)," *Submitted Brief*, 28 March 2019; and FEWO, [Evidence](#), 1st Session, 42nd Parliament, 4 April 2019, 0850 (Katherine Scott).

11 FEWO, [Evidence](#), 1st Session, 42nd Parliament, 4 April 2019, 0850 (Katherine Scott); and FEWO, [Evidence](#), 1st Session, 42nd Parliament, 21 February 2019, 0950 (Anne Milan).

12 FEWO, [Evidence](#), 1st Session, 42nd Parliament, 2 May 2019, 0910 (Chaneesa Ryan, Director of Health, Native Women's Association of Canada).

13 FEWO, [Evidence](#), 1st Session, 42nd Parliament, 2 April 2019, 0945 (Krista James).

14 FEWO, [Evidence](#), 1st Session, 42nd Parliament, 30 April 2019, 0845 (Lia Tsotsos, Director, Centre for Elder Research, Sheridan College).

15 See for example: Women Focus Canada Inc., "[Dr. Oluremi \(Remi\) Adewale – Women Focus Canada](#)," *Submitted Brief*; The Interior BC Council on Aging, "[Status of Women Brief: Older Women/Poverty/Vulnerability](#)," *Submitted Brief*; 2019; FEWO, [Evidence](#), 1st Session, 42nd Parliament, 4 April 2019, 0855 (Margaret Gillis, President, International Longevity Centre) and 0855 (Katherine Scott); and FEWO, [Evidence](#), 1st Session, 42nd Parliament, 2 May 2019, 0915 (Chaneesa Ryan).

16 FEWO, [Evidence](#), 1st Session, 42nd Parliament, 4 April 2019, 0855 (Margaret Gillis) and 0855 (Katherine Scott).

- Women are more likely than men to perform unpaid care work for their children or for family members, which affects their ability to participate fully in the workforce.¹⁷ Women can carry on this type of work in older age, when they might have to care for their partners, parents or grandchildren.¹⁸ Witnesses stated that caregiving work is not sufficiently recognized and explained that increased financial compensation for this type of work was necessary to limit the impacts it might have on senior women's economic security.¹⁹

Representatives from the Department of Employment and Social Development told the Committee about *Opportunity for All: Canada's First Poverty Reduction Strategy* (the Strategy) released in August 2018. The federal Strategy establishes an official poverty line based on the market basket measure²⁰ and establishes poverty reduction targets.²¹

SENIOR WOMEN'S INCOME

Since women earn less than men throughout their lives, they contribute smaller amounts than men to their Canada Pension Plans (CPP) or to their Québec Pension Plans (QPP) and to other savings plans, such as registered retirement savings plans (RRSPs) or tax-free savings accounts (TFSA). This situation can directly affect senior women's incomes.²² One witness explained: "Because of my late entry into the paying workforce,

17 FEWO, [Evidence](#), 1st Session, 42nd Parliament, 21 February 2019, 0845 (Jackie Holden, Senior Director, Seniors Policy, Partnerships and Engagement Division, Income Security and Social Development Branch, Department of Employment and Social Development); and FEWO, [Evidence](#), 1st Session, 42nd Parliament, 2 May 2019, 0915 (Chaneesa Ryan).

18 FEWO, [Evidence](#), 1st Session, 42nd Parliament, 2 April 2019, 0945 (Krista James).

19 See for example: FEWO, [Evidence](#), 1st Session, 42nd Parliament, 4 April 2019, 1000 (Mary Moody, as an individual) and 1000 (Lana Schriver, as an individual); FEWO, [Evidence](#), 1st Session, 42nd Parliament, 11 April 2019, 1025 (Oluremi Adewale, Chief Executive Officer, President, Founder, Women Focus Canada Inc.) and 1025 (Amanda Grenier, Professor, McMaster University, as an individual); and FEWO, [Evidence](#), 1st Session, 42nd Parliament, 30 April 2019, 0950 (Colleen Young, as an individual) and 0955 (Juliette Noskey, as an individual).

20 There are many ways to measure poverty. In their testimony, Statistics Canada and the Department of Employment and Social Development used the market basket measure, which measures poverty based on the price of a basket of goods and services that an individual requires to meet basic needs and achieve a modest standard of living. See: FEWO, [Evidence](#), 1st Session, 42nd Parliament, 21 February 2019, 1015 (Sébastien Larochelle-Côté).

21 FEWO, [Evidence](#), 1st Session, 42nd Parliament, 21 February 2019, 0845 (Jackie Holden).

22 See for example: FEWO, [Evidence](#), 1st Session, 42nd Parliament, 2 April 2019, 1000 (Gisèle Tassé-Goodman, Vice-President, Réseau FADOQ); FEWO, [Evidence](#), 1st Session, 42nd Parliament, 9 April 2019, 1025 (Laura Tamblyn Watts, Chief Public Policy Officer, Canadian Association of Retired Persons); The Interior BC



I have not had time to prepare adequately for retirement in terms of CPP or independent workplace retirement plans.”²³ As well, certain groups of senior women who have not been in the Canadian workforce for a long period of time, for instance, some immigrant and

Senior women’s poverty “is often a function of events occurring across their lives” and is not related to age alone.

refugee women, receive lower CPP payments.²⁴ Witnesses stressed the need for women to be able to contribute to their CPP or QPP if they work reduced hours, or stay at home full time to do unpaid care work.²⁵

The Committee heard about the important value of the choice that some individuals make to stay at home: “Because I stayed at home, I was able to volunteer extensively. I volunteered in my children’s schools, at my

church and in homeless shelters, and I served on the boards of directors of a number of not-for-profit organizations.”²⁶ Colleen Young told the Committee:

A young woman today should feel secure in having the choice to stay at home and raise a family or work part- or full-time, if she wishes to, and know that as she ages, she can receive the same deductions and benefits, and maybe even a pension, as her spouse does. Here is where the key lies. Where are her benefits if she chooses to stay home, is unemployed, but plays a key role in the development of her family? No dollar value has ever been assigned to such an important and extremely significant job in this world.²⁷

A representative from Statistics Canada indicated that poverty tends to decrease during senior years mainly because of government transfers such as the Old Age Security (OAS)

Council on Aging, “[Status of Women Brief: Older Women/Poverty/Vulnerability](#),” *Submitted Brief*, 2019; and FEWO, [Evidence](#), 1st Session, 42nd Parliament, 4 April 2019, 0955 (Mary Moody).

23 FEWO, [Evidence](#), 1st Session, 42nd Parliament, 4 April 2019, 1000 (Lana Schriver).

24 Canadian Research Institute for the Advancement of Women, “[Written submission from the Canadian Research Institute for the Advancement of Women to the House of Commons Standing Committee on the Status of Women for its study on challenges faced by senior women](#),” *Submitted Brief*, 28 March 2019.

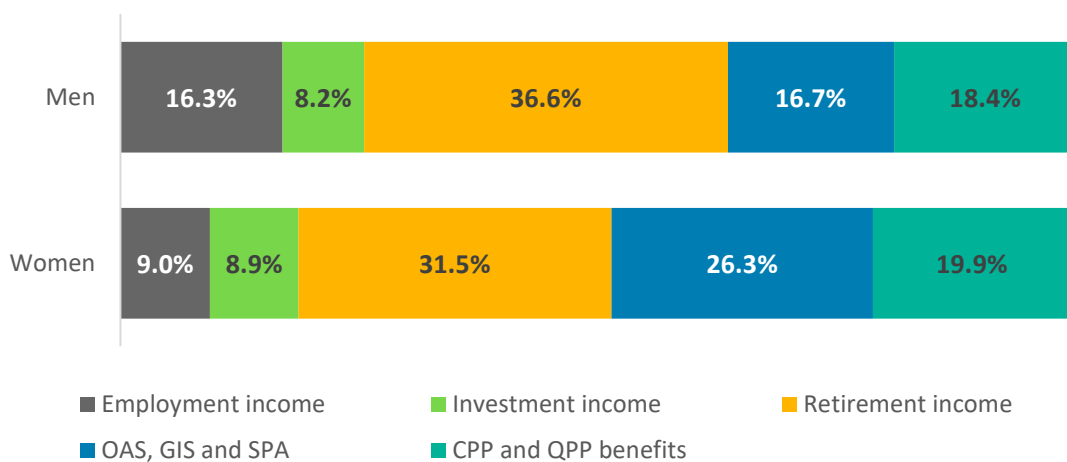
25 See for example: FEWO, [Evidence](#), 1st Session, 42nd Parliament, 2 April 2019 0945 (Krista James, National Director, Canadian Centre for Elder Law); FEWO, [Evidence](#), 1st Session, 42nd Parliament, 4 April 2019, 1000 (Lana Schriver); and FEWO, [Evidence](#), 1st Session, 42nd Parliament, 4 April 2019, 1000 (Mary Moody).

26 FEWO, [Evidence](#), 1st Session, 42nd Parliament, 2 May 2019, 1005 (Shirley Allan, as an individual).

27 FEWO, [Evidence](#), 1st Session, 42nd Parliament, 30 April 2019, 0950 (Colleen Young).

program²⁸ and the Guaranteed Income Supplement (GIS):²⁹ “Without these two programs, the poverty rate of seniors would be five times larger than it is now.”³⁰ OAS and GIS represent a significant proportion of senior women’s total income, as shown in Figure 3.

Figure 3 – Principal Income Sources for Seniors, as Percentage of Total Income, by Sex (2013)



Note: Abbreviations: Old Age Security (OAS), Guaranteed Income Supplement (GIS), Spouse’s Allowance (SPA), Canada Pension Plan (CPP) and Quebec Pension Plan (QPP).

Source: Figure prepared using data obtained from Tamara Hudon and Anne Milan, “[Table 7: Income sources as a percentage of total income of women and men aged 65 and over, Canada, 2003 and 2013](#),” *Senior Women*, Women in Canada: A Gender-based Statistical Report, 89-503-X, Statistics Canada, 30 March 2016.

Witnesses stated that benefits received from OAS and GIS are not enough for an individual “to lead a decent life with comfortable housing, adequate food and clothing, health care, let alone participate in social activities and recreational and cultural events, not to mention the costs of transportation and travel.”³¹ The cost of living varies greatly

28 The OAS is a pension program available to Canadians over 65 years old, who have lived in Canada for 10 years or more. The OAS is funded through the federal government’s general tax revenues.

29 A benefit under the OAS, the GIS provides an additional monthly benefit to OAS recipients who have a low income and are living in Canada.

30 FEWO, *Evidence*, 1st Session, 42nd Parliament, 21 February 2019, 0950 (Anne Milan).

31 Coalition citoyenne pour mieux vivre et mieux vieillir, “[Recommendations to the House of Commons Committee Situation of Senior Women](#),” *Submitted Brief*, 20 March 2019; and Congress of Union Retirees of Canada, “[Brief to the House of Commons Standing Committee on the Status of Women, on the Challenges Faced by Senior Women](#),” *Submitted Brief*, 20 March 2019.



across the country, so the fixed amount received through GIS and OAS might not be enough to cover the cost of living in some areas.³² Some witnesses indicated that the eligibility requirements for OAS, particularly the requirement to have lived in Canada for at least 10 years after the age of 18, can prevent some vulnerable seniors, such as senior immigrants, from accessing the program.³³ Several witnesses recommended that the federal benefits available to caregivers be increased and that the tax credit available to caregivers be refundable.³⁴

In a submitted brief, the Réseau FADOQ indicated that seniors often have higher day-to-day expenses than other age groups, because of the cost of medications or assistive devices. To cover these costs, some seniors might have to tap into their RRSPs or registered retirement income funds (RRIFs).³⁵

Widowhood can also negatively affect senior women's income. Outliving one's spouse can mean losing an important source of income; when a recipient of GIS and OAS dies, the surviving spouse can no longer rely on this source of income to fulfil financial obligations and must then restructure their personal finances.³⁶ As well, a witness explained that, when they become widowed, women who were not in charge of their household finances, but that now have to take care of their finances, can face a steep learning curve, a problem that may be compounded by the fact that most government services are primarily accessible online.³⁷

Witnesses stressed the need for financial literacy training for women to help them carefully plan their retirement.³⁸ As well, the Committee heard that "helping women understand the roles that different financial mechanisms play across their life course is very important."³⁹ Financial literacy training is also important for senior women as they

32 FEWO, [Evidence](#), 1st Session, 42nd Parliament, 2 April 2019, 1015 (Krista James).

33 Ibid.; and FEWO, [Evidence](#), 1st Session, 42nd Parliament, 26 February 2019, 0955 (Lori Weeks).

34 See for example: FEWO, [Evidence](#), 1st Session, 42nd Parliament, 2 April 2019, 1000 (Gisèle Tassé-Goodman); and FEWO, [Evidence](#), 1st Session, 42nd Parliament, 28 February 2019, 1015 (Laura Kadowaki, Policy Researcher, West Coast, Canadian Association of Retired Persons) and 0900 (Luce Bernier).

35 Réseau FADOQ, "[Brief—Challenges Facing Senior Women in Canada](#)," *Submitted Brief*, 28 February 2019.

36 FEWO, [Evidence](#), 1st Session, 42nd Parliament, 28 February 2019, 0900 (Danis Prud'homme); and FEWO, [Evidence](#), 1st Session, 42nd Parliament, 2 April 2019, 1000 (Gisèle Tassé-Goodman).

37 FEWO, [Evidence](#), 1st Session, 42nd Parliament, 30 April 2019, 0845 (Lia Tsotsos).

38 FEWO, [Evidence](#), 1st Session, 42nd Parliament, 9 April 2019, 1025 (Laura Tamblyn Watts); and YWCA Hamilton, "[Challenges Faced by Senior Women with a Focus on the Factors Contributing to Their Poverty and Vulnerability](#)," *Submitted Brief*, 2019.

39 FEWO, [Evidence](#), 1st Session, 42nd Parliament, 9 April 2019, 1025 (Laura Tamblyn Watts).

tend to report lower confidence in their financial knowledge than do men.⁴⁰ As well, the Committee heard that seniors might need help to understand which government programs are available to them and how to access them.⁴¹

To help address challenges facing women throughout their lives that can affect their economic security as seniors, the Committee recommends:

Recommendation 1

That the Government of Canada continue to address the pay disparities between men and women in the workforce by placing a priority on pay equity and ensuring more financial security for women later in life.

Recommendation 2

That the Government of Canada ensure that current support and tax credits for caregivers are meeting the needs of families caring for seniors.

Recommendation 3

That the Government of Canada, with the goal of ensuring a financially secure retirement for everyone in Canada and recognizing the value of unpaid caregiving work, create provisions like the drop-out from Employment Insurance in the Canada Pension Plan and/or tax benefits for individuals who stay at home to care for family members, including for those who do so full-time, to participate meaningfully in this contributory program; the definition of caregivers should include spouses, children, grandchildren, and Indigenous Elders.

To help increase the economic security of senior women, particularly for senior women living with low-incomes, the Committee recommends:

Recommendation 4

That the Government of Canada consider making changes to the Guaranteed Income Supplement (GIS) and Old Age Security (OAS) program to improve senior women's economic security, such as:

40 The Interior BC Council on Aging, "[Status of Women Brief: Older Women/Poverty/Vulnerability](#)," *Submitted Brief*, 2019.

41 FEWO, [Evidence](#), 1st Session, 42nd Parliament, 30 April 2019, 0925 (Michael Udy).



- **ensuring that senior women who are financially vulnerable, including those who are newcomers to Canada, are aware of and have access to OAS; and**
- **examining extending GIS benefits of a deceased recipient to a surviving spouse for a few months to allow the surviving spouse to restructure their personal finances.**

Recommendation 5

That the Government of Canada examine the development of a Seniors Entrepreneurship Program (possibly through the Women Entrepreneurship Strategy) and provide supports and services to older women to start their own businesses or develop particular skills.

Recommendation 6

That the Government of Canada consider removing the requirement for mandatory minimum withdrawals from Registered Retirement Income Funds that comes into effect at the end of a person's 71st year to ensure that seniors who choose to work past the age of 70 or who have other sources of income are not required to make the minimum withdrawals.

Recommendation 7

That the Government of Canada examine disability-related benefits and tax measures to ensure that persons living with disabilities are not penalized financially for increasing the number of hours they work in paid employment.

IMPROVING SENIOR WOMEN'S HEALTH AND WELLNESS

[G]ender affects most of the known factors that determine health, including education, occupation, income, social networks, physical and social environments and health services.... The first step in reducing health inequalities in older adult life is reducing socioeconomic disparities, with a focus on gender.⁴²

As women age, various factors can affect their health and wellness. Factors such as a lower socioeconomic status,⁴³ living alone,⁴⁴ and frailty⁴⁵ disproportionately affect women, and can have negative impacts on their overall health and wellbeing. This section of the report will examine various aspects of senior women's health, including access to safe and affordable housing, social isolation, specific health concerns, access to prescription drugs and to home care services.

To help improve senior women's health and wellness, the Committee recommends that:

Recommendation 8

That the Government of Canada continue to apply a gender-based analysis plus lens to the development of all policies and programs related to seniors, and develop programs to address the specific needs of minority women and members of the Lesbian, Gay, Bisexual, Transgender, Queer and Two-Spirit community.

Recommendation 9

That the Government of Canada work with the National Seniors Council and other stakeholders, including women, to develop a national seniors strategy that addresses the needs of Canada's senior population, ensures the equitable provision of supports and services across the country, and considers the unique needs of women, minority groups and the Lesbian, Gay, Bisexual, Transgender, Queer and Two-Spirit community.

42 Women Focus Canada Inc., "[Dr. Oluremi \(Remi\) Adewale – Women Focus Canada](#)," *Submitted Brief*.

43 Ibid.

44 FEWO, [Evidence](#), 1st Session, 42nd Parliament, 26 February 2019, 0950 (Lori Weeks).

45 Canadian Frailty Network, "[Addressing Challenges Faced by Senior Women](#)," *Submitted Brief*, March 2019.



ACCESS TO SAFE, ACCESSIBLE AND AFFORDABLE HOUSING

Access to safe, accessible and affordable housing is a challenge for many senior women, particularly those living alone or in rural areas, or who have a low income.⁴⁶ The Committee heard that 14% of senior-led households are in core housing need. People in core housing need to spend more than 30% of their income on housing. Seniors living on their own are more at risk of being in core housing need and a higher proportion of senior women living alone (27%) than senior men living alone (21%) are in core housing need.⁴⁷ Witnesses also told the Committee that they were witnessing an increase in homelessness among older women.⁴⁸ The Committee was told about the planned Canada Housing Benefit,⁴⁹ which would provide low-income seniors with a \$2,500 annual benefit starting in 2020.⁵⁰

The Committee heard about the Government of Canada's efforts to increase access to safe, accessible and affordable housing through the National Housing Strategy (NHS). The NHS is "focused primarily on vulnerable populations, including seniors, who have special housing needs and often limited financial resources."⁵¹ A representative from the Canada Mortgage and Housing Corporation (CMHC) told the Committee that seniors could benefit from affordable housing units and renovation projects funded under the NHS's National Housing Co-Investment Fund and from investments in community housing stock.⁵² The Committee was told that 33% of all investments under the NHS are expected to support the needs of women and girls.⁵³ However, the Committee was told

46 FEWO, *Evidence*, 1st Session, 42nd Parliament, 21 February 2019, 0845 (Jackie Holden); and Ontario Association of Interval and Transition Houses, "[Challenges Faced by Senior Women](#)," *Submitted Brief*, 28 March 2019.

47 FEWO, *Evidence*, 1st Session, 42nd Parliament, 21 February 2019, 0855 (Charles MacArthur, Senior Vice-President, Assisted Housing, Canada Mortgage and Housing Corporation).

48 FEWO, *Evidence*, 1st Session, 42nd Parliament, 4 April 2019 0900 (Margaret Gillis); and YWCA Hamilton, "[Challenges Faced by Senior Women with a Focus on the Factors Contributing to Their Poverty and Vulnerability](#)," *Submitted Brief*, 2019.

49 The Government of Canada announced the creation of the Canada Housing Benefit (CHB) in November 2017 as part of the National Housing Strategy. The CHB is scheduled to be launched in 2020. For more information, see: Government of Canada, [Canada's National Housing Strategy: A Place to Call Home](#).

50 FEWO, *Evidence*, 1st Session, 42nd Parliament, 21 February 2019, 0930 (Charles MacArthur).

51 *Ibid.*, 0850.

52 *Ibid.*, 0855.

53 *Ibid.*

that funding under the NHS is “going to fall woefully short of what's needed”⁵⁴ and that the NHS must “better address the housing needs of older women.”⁵⁵

Witnesses stressed the importance of independent living and of keeping seniors in their homes.⁵⁶ For example, Anita Pokiak, Board Member of Pauktuutit Inuit Women of Canada, told the Committee: “I know a lot of the Elders don't like to go into centres. They like their dignity and to be on their own.”⁵⁷ Witnesses talked about innovative options that could help seniors stay in or find housing that suits their needs, such as co-housing, “a form of intentional community where people come together and choose to live in a community,”⁵⁸ and universal design, a design that makes housing sustainable and safe as people age.⁵⁹ According to a representative from CMHC, “[u]niversal design is built so that, as the population ages, it's really easy to make ... adaptations.”⁶⁰

To help senior women live independently and ensure that they can stay in their homes as they age, the Committee recommends that:

Recommendation 10

That the Government of Canada continue to ensure that the specific housing needs of seniors are addressed and prioritized through the National Housing Strategy, with consideration for the intersectional needs of groups such as women, minority communities and members of the Lesbian, Gay, Bisexual, Transgender, Queer and Two-Spirit community, and gather data to close the knowledge gap on senior women living alone.

SOCIAL ISOLATION AND LONELINESS

While the Committee heard that many Canadians wish to stay in their homes and communities as they age, witnesses added that the proper supports must be in place for these seniors, particularly those who live alone. Living alone can contribute to seniors’

54 FEWO, *Evidence*, 1st Session, 42nd Parliament, 4 April 2019, 0940 (Katherine Scott).

55 Ibid., 0900 (Margaret Gillis).

56 FEWO, *Evidence*, 1st Session, 42nd Parliament, 11 April 2019, 1005 (Oluremi Adewale).

57 FEWO, *Evidence*, 1st Session, 42nd Parliament, 9 April 2019, 1010 (Anita Pokiak, Board Member, Pauktuutit Inuit Women of Canada).

58 FEWO, *Evidence*, 1st Session, 42nd Parliament, 26 February 2019, 0955 (Lori Weeks).

59 FEWO, *Evidence*, 1st Session, 42nd Parliament, 21 February 2019, 0915 and 0920 (Charles MacArthur).

60 Ibid., 0915.



social isolation, and as senior women are more likely to live alone, they can be disproportionately affected by social isolation.⁶¹ According to witnesses, other factors contributing to senior's social isolation include:⁶²

- poverty and economic insecurity;
- health concerns, such as chronic pain, disability and mental health troubles;
- history of being subject to discrimination and violence;
- lack of accessible and affordable transportation options, including the loss of one's driver's license;
- living in residential care;
- language barriers;
- lack of access to information, particularly digital information, on services available for seniors; and
- lack of funding and resources for community programming for seniors.

Witnesses explained that social isolation can have significant impacts on seniors' mental and physical health, as well as their quality of life; social isolation can lead to a loss of social connection and self-esteem, an increase in vulnerability to abuse, poor physical and cognitive health, insufficient nutrition, and an increase in seniors' mortality.⁶³ However,

61 FEWO, [Evidence](#), 1st Session, 42nd Parliament, 30 April 2019, 0855 (Michael Udy); FEWO, [Evidence](#), 1st Session, 42nd Parliament, 26 February 2019, 0950 (Lori Weeks); and FEWO, [Evidence](#), 1st Session, 42nd Parliament, 11 April 2019, 0945 (Oluremi Adewale).

62 See for example: FEWO, [Evidence](#), 1st Session, 42nd Parliament, 11 April 2019, 1035 (Amanda Grenier); DisAbleD Women's Network of Canada, "[Parliamentary Brief](#)," *Submitted Brief*, 29 March 2019; FEWO, [Evidence](#), 1st Session, 42nd Parliament, 21 February 2019, 0945 (Danielle Bélanger); Ontario Association of Interval and Transition Houses, "[Challenges Faced by Senior Women](#)," *Submitted Brief*, 28 March 2019; and FEWO, [Evidence](#), 1st Session, 42nd Parliament, 30 April 2019, 0900 (Vanessa Herrick, Executive Director, Seniors Action Quebec) 0850 (Lia Tsotsos).

63 See for example: FEWO, [Evidence](#), 1st Session, 42nd Parliament, 21 February 2019, 0845 (Jackie Holden); FEWO, [Evidence](#), 1st Session, 42nd Parliament, 4 April 2019, 0900 (Margaret Gillis) and 0930 (Katherine Scott); and FEWO, [Evidence](#), 1st Session, 42nd Parliament, 28 February 2019, 1015 (Madeleine Bélanger, as an individual).

witnesses emphasized the importance of recognizing that some seniors may choose to live alone and that assumptions that may be informed by ageism should be questioned.⁶⁴

Witnesses emphasized the importance of seniors' centres, age-friendly communities, volunteer opportunities, access to transportation, telephone outreach services, and community programs to combat seniors' social isolation.⁶⁵ The Government of Canada's New Horizons for Seniors Program (NHSP) is delivered through Employment and Social Development Canada and provides grants and contributions funding to projects working to empower seniors in their communities. Among the NHSP's objectives is to support seniors' social participation and inclusion.⁶⁶ Witnesses explained that many effective programs that target various aspects of seniors' social isolation receive funding through the NHSP, however, that when the funding for these projects ends, so does the project.⁶⁷

[S]ocial isolation can have significant impacts on seniors' mental and physical health, as well as their quality of life.

Often, as a result of a lack of available health services in many Inuit communities, Inuit seniors are required to move far from their families, cultures and communities to receive care. This move represents a significant loss for the community, as well as an increase in Inuit seniors' social isolation. The cost and inaccessibility of transportation in remote communities often means that when an Inuit elder moves south to a long-term care facility, their families cannot visit them very often, if at all. This distance from their community and culture can have long-lasting negative impacts on seniors, such as social isolation and loss of culture, and on their home communities, as communities lose their traditional teachers and caregivers.⁶⁸

64 FEWO, *Evidence*, 1st Session, 42nd Parliament, 30 April 2019, 0915 (Lia Tsotsos).

65 See for example: FEWO, *Evidence*, 1st Session, 42nd Parliament, 21 February 2019, 1000 (Anna Romano, Director General, Centre for Health Promotion, Health Promotion and Chronic Disease Prevention Branch, Public Health Agency of Canada); Transportation Options Network for Seniors, "[Women & Transportation in Manitoba](#)," *Submitted Brief*; Saskatoon Services for Seniors, "[Challenges Facing Senior Women in Canada](#)," *Submitted Brief*, 29 March 2019; and YWCA Hamilton, "[Challenges Faced by Senior Women with a Focus on the Factors Contributing to Their Poverty and Vulnerability](#)," *Submitted Brief*, 2019.

66 Government of Canada, [New Horizons for Seniors Program](#).

67 FEWO, *Evidence*, 1st Session, 42nd Parliament, 30 April 2019, 0940 (Lia Tsotsos).

68 FEWO, *Evidence*, 1st Session, 42nd Parliament, 9 April 2019, 0950 and 1000 (Anita Pokiak).



To address the factors contributing to seniors' social isolation and access to services, as identified by witnesses, the Committee recommends that:

Recommendation 11

That the Government of Canada continue to support the National Seniors Council to increase awareness and understanding of the social isolation of seniors, and continue the increased funding for the New Horizons for Seniors program to support seniors-driven projects to combat social isolation and help seniors, including senior women living in rural and remote communities and immigrant women, to continue to participate fully in the community.

Recommendation 12

That the Government of Canada, as part of the government's investment in transportation infrastructure, work with provinces and territories to address the lack of transportation options for seniors living in rural and remote communities.

SENIOR WOMEN'S HEALTH

The Committee heard that good data is required to develop effective policies and programs to support seniors in Canada. While the Public Health Agency of Canada and Statistics Canada conduct research related to various aspects of Canadian seniors' experiences, including health and wellbeing, certain gaps in the data exist.⁶⁹ For example, both Helen Kennedy of Egale Canada and Chaneesa Ryan of the Native Women's Association of Canada indicated that health-related research may overlook certain groups of women and senior women, such as "lesbian, [bisexual], transgender, queer, intersex, and Two-Spirit women" and Indigenous women.⁷⁰ Furthermore, Statistics Canada identified gaps in its administrative data related to seniors in Canada, such as data on the experiences of individuals living in residential care facilities.⁷¹

Canada's aging population means that a greater proportion of Canadians will require specific health care services. Since the prevalence of certain chronic diseases tends to increase with age, it is likely that Canadians 65 years and over live with at least one

69 FEWO, *Evidence*, 1st Session, 42nd Parliament, 21 February 2019, 1000 and 1005 (Anna Romano).

70 FEWO, *Evidence*, 1st Session, 42nd Parliament, 2 May 2019, 0910 (Helen Kennedy, Executive Director, Egale Canada); and 940 (Chaneesa Ryan).

71 FEWO, *Evidence*, 1st Session, 42nd Parliament, 21 February 2019, 0955 (Anne Milan).

chronic condition.⁷² Since Canadian women tend to live longer than men, they may be more likely than men over their lifetimes to develop a chronic condition or a disability, and encounter complex health challenges as they age.

Witnesses indicated that Indigenous populations tend to experience lower levels of overall wellness when compared to other populations groups in Canada. Furthermore, as they age, Indigenous women are more likely to develop chronic conditions, dementia and/or disabilities earlier in life than non-Indigenous women.⁷³ Despite the prevalence of these health outcomes among Indigenous populations, access to health services for these conditions may be limited. Chaneesa Ryan of the Native Women’s Association of Canada explained that “44% of first nations people aged 55 and older require one or more continuing care services. However, fewer than 1% have access to long-term care facilities on reserve.”⁷⁴

To help improve senior women’s health, the Committee recommends:

Recommendation 13

That the Government of Canada continue to include lesbian, gay, bisexual, transgender, queer and two-spirit older and aging individuals in intersectional research that previously only involved women.

Recommendation 14

That the Government of Canada ensure that government-supported research and study of aging and seniors issues apply a gender-based analysis plus lens to gather better data to help guide more informed policy decisions.

Senior Women’s Specific Health Challenges

The Committee heard that among the most prevalent health issues in aging populations are “cardiovascular disease[s], strokes, malignancies, osteoporosis, and cognitive and psychiatric illness.”⁷⁵ Senior women are disproportionately affected by both osteoporosis and rheumatoid arthritis when compared to senior men.⁷⁶ Similar to the

72 FEWO, *Evidence*, 1st Session, 42nd Parliament, 21 February 2019, 1000 (Anna Romano).

73 FEWO, *Evidence*, 1st Session, 42nd Parliament, 2 May 2019, 0915 (Chaneesa Ryan).

74 *Ibid.*, 0920.

75 FEWO, *Evidence*, 1st Session, 42nd Parliament, 4 April 2019, 0855 (Margaret Gillis).

76 FEWO, *Evidence*, 1st Session, 42nd Parliament, 21 February 2019, 1000 (Anna Romano).



prevalence of chronic conditions, the prevalence of disability increases with age, and is thus higher among women than men over their lifetimes.⁷⁷ Finally, mental illness may develop later in life following major life transitions related to aging.⁷⁸

Witnesses identified some specific health challenges and their impacts on senior women's health and wellbeing, including dental problems, dementia, inadequate nutrition, hearing loss and injuries from falls. Falls pose significant risk to seniors' overall mental and physical health; of those seniors who experience a fall, close to 20% will die within one year of the fall.⁷⁹ Some of these other challenges are detailed in the paragraphs that follow.

Dental care is integral to good overall health. Poor oral hygiene can result in oral diseases; while these diseases are preventable, left untreated they can require costly emergency procedures and potential health complications. Access to dental care can be difficult for seniors who rely on others for care and transportation, as well as for seniors without medical coverage that covers dental costs.⁸⁰

Senior women are more likely than senior men to be diagnosed with dementia.⁸¹ While 7.1% of Canadians suffer from dementia, older women represent approximately two-thirds of this total. The burden of dementia care often falls on women, which can result in elevated mental, physical and financial stress.⁸² The Committee heard from a representative of the Public Health Agency of Canada that it is leading the development of a national dementia strategy, which should be released in spring 2019;⁸³ since women tend to be disproportionately affected by dementia in various ways,⁸⁴ this strategy may be particularly relevant for senior women.

Witnesses spoke about certain factors related to aging that may result in the misdiagnosis of seniors' health conditions. For example, proper nutrition, including

77 DisAbleD Women's Network of Canada, "[Parliamentary Brief](#)," *Submitted Brief*, 29 March 2019.

78 FEWO, [Evidence](#), 1st Session, 42nd Parliament, 21 February 2019, 1000 (Anna Romano).

79 Ibid.

80 Canadian Dental Hygienists Association, "[Submission to the Standing Committee on the Status of Women, Regarding Challenges Faced by Senior Women in Canada](#)," *Submitted Brief*, 29 March 2019; and FEWO, [Evidence](#), 1st Session, 42nd Parliament, 11 April 2019, 1035 (Oluremi Adewale).

81 FEWO, [Evidence](#), 1st Session, 42nd Parliament, 21 February 2019, 1000 (Anna Romano).

82 Ibid.; and FEWO, [Evidence](#), 1st Session, 42nd Parliament, 4 April 2019, 0855 (Margaret Gillis).

83 FEWO, [Evidence](#), 1st Session, 42nd Parliament, 21 February 2019, 1000 (Anna Romano).

84 Ibid.; and FEWO, [Evidence](#), 1st Session, 42nd Parliament, 4 April 2019, 0855 (Margaret Gillis).

access to traditional foods for Indigenous elders,⁸⁵ plays a significant role in seniors' health. Seniors may receive incorrect diagnoses for health problems as a result of cognitive impairments due to poor nutrition, for example, Laura Tamblyn Watts of the Canadian Association of Retired Persons indicated that symptoms resulting from improper nutrition may lead to a senior being inappropriately diagnosed with dementia.⁸⁶ Similarly, some health care professionals may not recognize the signs of hearing loss in seniors and may instead provide a diagnosis of cognitive impairment.⁸⁷ Stigma, cost, and self-esteem issues may deter seniors from seeking appropriate hearing health services, leading to mental health troubles, social isolation and an increased risk of falls and other health complications among seniors.⁸⁸

To help address senior women's specific health challenges, the Committee recommends:

Recommendation 15

That the Government of Canada, in collaboration with provinces and territories, ensure equitable access for all seniors to hearing health care and assistive devices, and work with appropriate agencies to increase public awareness to prevent hearing loss, to identify and manage hearing loss and to destigmatize hearing loss.

Recommendation 16

That the Government of Canada continue to build on Canada's National Dementia Strategy and the work of the Ministerial Advisory Board on Dementia to ensure Canada is tackling the increasing level of dementia in Canada's aging population.

Recommendation 17

That the Government of Canada develop a strategy to combat the issue of malnutrition for seniors and encourage access to healthy and nutritious food.

85 FEWO, *Evidence*, 1st Session, 42nd Parliament, 9 April 2019, 1020 (Anita Pokiak).

86 Ibid., 1020 (Laura Tamblyn Watts).

87 FEWO, *Evidence*, 1st Session, 42nd Parliament, 26 February 2019, 0845 (Jean Holden, Advisory Board Member, Hearing Health Alliance of Canada) and 0850 (Valerie Spino, Advisory Board Member, Hearing Health Alliance of Canada); and Cathy Cuthbertson, "*Brief*," *Submitted Brief*.

88 Ibid.



Recommendation 18

That the Government of Canada develop culturally specific and appropriate multilingual support services specifically for older women and support the development of orientation programs to help older women and their families navigate the complexities of the justice, immigration and health care systems.

Recommendation 19

That the Government of Canada continue to develop initiatives to promote healthy aging for women, including physical programs and mental health support programs.

Access to Appropriate Health Care

Canada's health care system often provides various types of care through a combination of providers, and this system may be challenging for seniors to navigate as they age.⁸⁹ This situation can be particularly true for First Nation seniors because of the jurisdictional division of First Nations' health care provision on and off reserve.⁹⁰ Access to health services may also vary by region.⁹¹

With respect to Indigenous seniors, witnesses explained that a large proportion of Indigenous seniors live off-reserve. In accessing health services off-reserve, seniors may encounter racism in the health care system, and may not have access to culturally safe supports in these contexts.⁹² To access necessary health services as they age, including mental health and addictions services, some Indigenous seniors may be forced to leave their communities. Leaving their communities, families and cultures can be traumatizing for Indigenous seniors, particularly for survivors of residential schools or the Sixties Scoop who were forced to leave their communities as children.⁹³

89 FEWO, *Evidence*, 1st Session, 42nd Parliament, 2 April 2019 0945 (Krista James); and FEWO, *Evidence*, 1st Session, 42nd Parliament, 2 May 2019, 0935-0940 (Kathy Majowski, Board Chair, Canadian Network for the Prevention of Elder Abuse).

90 FEWO, *Evidence*, 1st Session, 42nd Parliament, 26 February 2019, 1000 (Tania Dick, Vancouver Island Representative, British Columbia, First Nations Health Council); and FEWO, *Evidence*, 1st Session, 42nd Parliament, 2 May 2019, 0920 (Chaneeesa Ryan).

91 Ibid.

92 FEWO, *Evidence*, 1st Session, 42nd Parliament, 2 May 2019, 0940-0945 (Chaneeesa Ryan).

93 FEWO, *Evidence*, 1st Session, 42nd Parliament, 2 May 2019, 0920 (Chaneeesa Ryan) and 925 (Roseann Martin, Elder, Native Women's Association of Canada).

Other factors were identified by witnesses as being potentially challenging to senior women's access to health services. For some senior women, language barriers may impede their access to health services. For example, Anglophone senior women living in Quebec may not have access to health services in English in their communities or may not be comfortable describing their health challenges to service providers in French.⁹⁴

Furthermore, accessing health services may be a particular challenge for seniors who are living with a disability; lack access to transportation; or have to travel long distances from rural and remote communities to seek medical services.⁹⁵ In addition, witnesses suggested that gender differences exist in seniors' access to, as well as experiences within, the health care system, which can have harmful consequences for senior women.⁹⁶

Witnesses added that health care staff must be properly trained in addressing the health concerns of, and providing proper care to, diverse seniors, including women identifying as lesbian, gay, bisexual, transgender, queer, two-spirit and other identities, as well as Indigenous women and women living with disabilities.⁹⁷

Witnesses emphasized the importance of access to appropriate health services for diverse groups of senior women in their homes and communities. Health care services that are provided close to home and are focused on prevention, including fall prevention, were highlighted as imperative to ensure that seniors stay well and that the prevalence and length of hospital stays are reduced.⁹⁸

To help ensure senior women's access to appropriate health care, the Committee recommends:

94 FEWO, *Evidence*, 1st Session, 42nd Parliament, 30 April 2019, 0900 (Vanessa Herrick).

95 See for example: FEWO, *Evidence*, 1st Session, 42nd Parliament, 26 February 2019, 1000 (Tania Dick); Assaulted Women's Helpline and Seniors Safety Line, "[Challenges Faced by Senior Women](#)," *Submitted Brief*, 29 March 2019; Coalition for Healthy Aging in Manitoba, "[Challenges Faced by Senior Women](#)," *Submitted Brief*, 29 March 2019; DisAbleD Women's Network of Canada, "[Parliamentary Brief](#)," *Submitted Brief*, 29 March 2019.

96 FEWO, *Evidence*, 1st Session, 42nd Parliament, 4 April 2019, 0855 (Margaret Gillis).

97 See for example: FEWO, *Evidence*, 1st Session, 42nd Parliament, 4 April 2019, 0915 (Katherine Scott); FEWO, *Evidence*, 1st Session, 42nd Parliament, 2 April 2019, 1000 (Philippe Poirier-Monette, Collective Rights Advisor, Provincial Secretariat, Réseau FADOQ); FEWO, *Evidence*, 1st Session, 42nd Parliament, 30 April 2019, 0925 (Vanessa Herrick); FEWO, *Evidence*, 1st Session, 42nd Parliament, 2 May 2019, 0910 (Helen Kennedy).

98 FEWO, *Evidence*, 1st Session, 42nd Parliament, 4 April 2019, 0915 (Kiran Rabheru, Board Chair, International Longevity Centre Canada); FEWO, *Evidence*, 1st Session, 42nd Parliament, 30 April 2019, 0935 (Lia Tsotsos).



Recommendation 20

That the Government of Canada provide funding to ensure access to services that meet the mental health needs of diverse groups of seniors, including members of the Lesbian, Gay, Bisexual, Transgender, Queer and Two-Spirit communities, as well as women living with disabilities and Indigenous women, and work with provincial and territorial governments to ensure that diverse groups of seniors have access to safe spaces in health care settings.

Access to Prescription Medication and to End-of-Life Medical Care

The Committee heard concerns related to prescription drugs, as well as to the provision of medical assistance in dying for senior women. The cost of medication is a concern for many seniors, and senior women may be disproportionately affected by these costs.⁹⁹ Witnesses suggested that there are significant gaps in the coverage of pharmaceutical drug costs by public insurance plans across Canada, and many seniors may not have private coverage.¹⁰⁰ Seniors living in lower income situations may have to choose between paying rent and buying food or purchasing their medications.¹⁰¹ Witnesses emphasized the need for a universal pharmacare program to reduce the cost of medication for seniors.

In addition to the cost of medication, witnesses highlighted several other concerns related to prescription drugs. Firstly, if a senior is receiving care from various health care providers, there may not be a clear overview or coordination of the assortment of drugs they are taking.¹⁰² In addition, there may be misunderstanding or confusion about how to take various medications safely, as such, it is important for health care professionals to ensure that senior patients receive information in clear and accessible ways.¹⁰³

Regarding medical assistance in dying, Bonnie Brayton of the DisAbled Women's Network of Canada suggested that legislative changes introduced to permit medical assistance in dying in Canada may leave women living with disabilities vulnerable to abuse because of a lack of standards and monitoring mechanisms. She explained that women living with disabilities might consider medically assisted dying because of a lack

99 FEWO, *Evidence*, 1st Session, 42nd Parliament, 4 April 2019, 0920 (Katherine Scott).

100 Ibid.

101 Ibid.; and 1020 (Mary Moody).

102 FEWO, *Evidence*, 1st Session, 42nd Parliament, 30 April 2019, 0935 (Michael Udy).

103 EWO, *Evidence*, 1st Session, 42nd Parliament, 11 April 2019 0950 (Oluremi Adewale).

of access to palliative care as well as to other services and supports that could improve their quality of life. She indicated that providing, and guaranteeing access to, these services would ensure that women living with disabilities have options other than medically assisted dying.¹⁰⁴

To help senior women with the costs of prescription drugs the Committee recommends that:

Recommendation 21

That the Government of Canada pursue options to help seniors and Canadians with the high cost of prescription drugs, including a national pharmacare program, and ensure that the development and implementation of a national pharmacare plan takes into consideration the specific needs of senior women, including financial barriers from out-of-pocket payments for medication.

Availability of Home Care and Support Services

Witnesses highlighted the importance of seniors staying in their homes and communities, instead of in long-term care homes or hospitals.¹⁰⁵ In addition to contributing positively to seniors' wellbeing, living at home and using home care services may also be more cost-efficient than long-term hospital care.¹⁰⁶ However, home care services can be difficult to access for seniors, and may not meet the diverse needs of Canadian seniors.¹⁰⁷

Senior women are more likely to receive paid or unpaid support, predominantly with transportation, than senior men.¹⁰⁸ However, according to Statistics Canada, approximately twice the number of senior women have unmet care needs compared to senior men.¹⁰⁹

104 FEWO, *Evidence*, 1st Session, 42nd Parliament, 2 May 2019, 0930-0935 (Bonnie Brayton, National Executive Director, DisAbled Women's Network of Canada).

105 Selma Tobah, "[Brief submitted to the House of Commons Standing Committee on the Status of Women](#)," *Submitted Brief*, 21 March 2019; FEWO, *Evidence*, 1st Session, 42nd Parliament, 9 April 2019, 1000 (Anita Pokiak); and FEWO, *Evidence*, 1st Session, 42nd Parliament, 26 February 2019, 1005 (Tania Dick).

106 FEWO, *Evidence*, 1st Session, 42nd Parliament, 4 April 2019, 0945 (Kiran Rabheru); and Selma Tobah, "[Brief submitted to the House of Commons Standing Committee on the Status of Women](#)," *Submitted Brief*, 21 March 2019.

107 FEWO, *Evidence*, 1st Session, 42nd Parliament, 4 April 2019, 0910 (Katherine Scott).

108 FEWO, *Evidence*, 1st Session, 42nd Parliament, 21 February 2019, 0955 (Anne Milan); and FEWO, *Evidence*, 1st Session, 42nd Parliament, 4 April 2019, 0910 (Katherine Scott).

109 Selma Tobah, "[Brief submitted to the House of Commons Standing Committee on the Status of Women](#)," *Submitted Brief*, 21 March 2019; and Women Focus Canada Inc., "[Dr. Oluremi \(Remi\) Adewale – Women Focus Canada](#)," *Submitted Brief*.



The lack of funding for home care was identified as a factor contributing to insufficient and inconsistent home care across the country. In Inuit communities, many health care services and resources are unavailable, including sufficiently trained home care staff, and culturally appropriate palliative care.¹¹⁰ Indigenous senior women may require specific services and care to address the effects of “unhealed historic trauma” and other adverse experiences, which may not be available in their communities.¹¹¹

Without home care services, seniors may be vulnerable to various health challenges, including falls, poor nutrition and mental health troubles.¹¹² In the absence of accessible home care services, women’s unpaid caregiving and labour often fills the gaps. Women of all ages continue to bear a disproportionate amount of caregiving responsibilities; “[s]enior women are more apt to receive unpaid help from their daughters, while for senior men it more often comes from their spouse.”¹¹³ As indicated earlier in this report, women’s caregiving responsibilities can affect their economic security, as well as their health, across their lifetimes.

To ensure that all senior women have access to appropriate home and community care services, the Committee recommends that:

Recommendation 22

That the Government of Canada, in collaboration with the provinces and territories, examine issues of diversity in access to home and community care, with particular consideration for the unique needs of diverse senior women, to ensure that their specific home and community care needs are met.

Recommendation 23

That the Government of Canada work with Northern and Indigenous communities to improve access to culturally sensitive and appropriate long-term, residential and palliative care facilities in their communities, and work to ensure that, when Elders must leave their community for care, they have access to culturally appropriate food and community support.

110 FEWO, [Evidence](#), 1st Session, 42nd Parliament, 9 April 2019, 0945 (Anita Pokiak).

111 FEWO, [Evidence](#), 1st Session, 42nd Parliament, 28 February 2019, 1030 (Catherine Twinn, Lawyer, as an individual).

112 Ibid.; and Saskatoon Services for Seniors, “[Challenges Facing Senior Women in Canada](#),” *Submitted Brief*, 29 March 2019.

113 FEWO, [Evidence](#), 1st Session, 42nd Parliament, 21 February 2019, 0955 (Anne Milan); and FEWO, [Evidence](#), 1st Session, 42nd Parliament, 4 April 2019, 0910 (Katherine Scott).

ELIMINATING DISCRIMINATION AND VIOLENCE AGAINST SENIOR WOMEN

The Committee heard that ageism, “a combination of prejudicial attitudes towards older people, old age and aging itself,”¹¹⁴ can greatly affect senior women’s lives. Senior women may be ignored, underestimated or patronized, which can create barriers for them to overcome with regards to body image, health, finances and justice.¹¹⁵ Ageism can also negatively affect government policy decisions, development and implementation.¹¹⁶

Women can experience discrimination and gender-based violence at any time of their lives, including in their senior years, and the effects of violence “can accumulate, creating compound effects of violence experienced through the life stages.”¹¹⁷ Senior women’s experiences of discrimination and violence can be compounded by several identity factors, such as age, sexual orientation and disability.¹¹⁸ Indeed, the Committee heard that “[o]lder women’s lives are often impacted by the dual effects of sexism and ageism.”¹¹⁹ Other factors can increase senior women’s risk of experiencing violence such as living with a disability, widowhood, dependence on a caregiver, or socio-economic conditions.¹²⁰ As well, senior women who are sponsored immigrants might have no choice but to stay with family members who are financially responsible for them, a situation which “sets up a dynamic of deep concern about abuse and neglect.”¹²¹ The strategy, *It’s Time: Canada’s Strategy to Prevent and Address Gender-Based Violence* was launched in 2017, and aims to

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- 114 FEWO, *Evidence*, 1st Session, 42nd Parliament, 4 April 2019, 0855 (Margaret Gillis).
- 115 Ibid; FEWO, *Evidence*, 1st Session, 42nd Parliament, 26 February 2019, 0950 (Lori Weeks); and The Interior BC Council on Aging, “[Status of Women Brief: Older Women/Poverty/Vulnerability](#),” *Submitted Brief*, 2019.
- 116 Coalition for Healthy Aging in Manitoba, “[Challenges Faced by Senior Women](#),” *Submitted Brief*, 29 March 2019.
- 117 FEWO, *Evidence*, 1st Session, 42nd Parliament, 2 May 2019, 0850 (Kathy Majowski).
- 118 FEWO, *Evidence*, 1st Session, 42nd Parliament, 21 February 2019, 0945 (Danielle Bélanger); National Pensioners Federation, “[Submission by the National Pensioners Federation to the House of Commons Standing Committee on the Status of Women: Challenges faced by senior women contributing to their poverty and vulnerability](#),” *Submitted Brief*, 25 March 2019; and FEWO, *Evidence*, 1st Session, 42nd Parliament, 2 May 2019, 0905 (Helen Kennedy).
- 119 FEWO, *Evidence*, 1st Session, 42nd Parliament, 2 May 2019, 0850 (Kathy Majowski).
- 120 The Interior BC Council on Aging, “[Status of Women Brief: Older Women/Poverty/Vulnerability](#),” *Submitted Brief*, 2019; FEWO, *Evidence*, 1st Session, 42nd Parliament, 9 April 2019, 0945 (Anita Pokiak); FEWO, *Evidence*, 1st Session, 42nd Parliament, 2 May 2019, 0850 (Kathy Majowski) and 0855 (Bonnie Brayton).
- 121 FEWO, *Evidence*, 1st Session, 42nd Parliament, 9 April 2019, 1015 (Laura Tamblyn Watts).



address gender-based violence and gaps in support for diverse groups experiencing gender-based violence, including senior women.¹²²

A common form of violence against senior women is financial abuse. Because technology evolves quickly and can sometimes be difficult to master, especially with regards to online banking, seniors who are less “tech-savvy” might be vulnerable to fraud or scams.¹²³ Other examples of financial abuse against seniors can include misuse of power of attorney, being forced to sign legal papers one does not understand or being forced to give money to relatives.¹²⁴ The Committee was told that in Inuit communities,

[O]lder women's lives are often impacted by the dual effects of sexism and ageism.

Inuit Elders are often the leaseholders of social housing; as such they may be vulnerable to family members taking advantage of this situation by moving in and not contributing to household costs.¹²⁵ Educating seniors on how to protect themselves to avoid being victims of financial abuse, particularly online, and raising awareness of the signs of financial abuse

among seniors is important.¹²⁶ Certain elder abuse prevention projects receive funding through the Government of Canada’s New Horizons for Seniors Program, which is administered by Employment and Social Development Canada.¹²⁷

The Committee was told that senior women who are victims and survivors of violence might be ashamed or afraid to ask for help. To that end, confidential phone services can help them assess their situation, evaluate their options, and move forward.¹²⁸ As well, senior women face barriers when trying to seek help when they are victims and survivors of violence, including a lack of services adapted to the needs of seniors, social

122 FEWO, [Evidence](#), 1st Session, 42nd Parliament, 21 February 2019, 0950 (Danielle Bélanger).

123 FEWO, [Evidence](#), 1st Session, 42nd Parliament, 28 February 2019, 0915 (Danis Prud'homme).

124 The Interior BC Council on Aging, “[Status of Women Brief: Older Women/Poverty/Vulnerability](#),” *Submitted Brief*, 2019.

125 FEWO, [Evidence](#), 1st Session, 42nd Parliament, 9 April 2019, 0945 (Anita Pokiak).

126 FEWO, [Evidence](#), 1st Session, 42nd Parliament, 28 February 2019, 0915 (Danis Prud'homme); FEWO, [Evidence](#), 1st Session, 42nd Parliament, 11 April 2019, 1030 (Oluremi Adewale); and Association québécoise de défense des droits des personnes retraitées et préretraitées, “[Brief submitted to the House of Commons Standing Committee on the Status of Women, Ottawa Chaired by Ms. Karen Vecchio](#),” *Submitted Brief*, 28 February 2019.

127 FEWO, [Evidence](#), 1st Session, 42nd Parliament, 21 February 2019, 0850 (Jackie Holden).

128 Assaulted Women’s Helpline and Seniors Safety Line, “[Challenges Faced by Senior Women](#),” *Submitted Brief*, 29 March 2019.

isolation, and cultural or language barriers.¹²⁹ Some senior women experiencing violence may be reluctant to go to a shelter or a transition house because they might have to move far away from their friends and families to access these services, or because shelters and transition houses are not adapted to their needs.¹³⁰

Also, witnesses stated that senior women can face barriers accessing legal services because of a lack of financial resources or because they might not know where to find a lawyer.¹³¹ Some groups of senior women can face additional barriers in accessing justice. For example, rates of prosecution and conviction of sexual assault of senior women in institutional settings are very low.¹³²

In order to help eliminate discrimination and gender-based violence against senior women, the Committee recommends:

Recommendation 24

That the Government of Canada examine the experience of other countries that have appointed either a seniors' advocate or seniors' ombudsman, and whether this office would be beneficial in Canada.

Recommendation 25

That the Government of Canada recognize the issue of ageism that exists in our society and adversely affects the senior population and develop a strategic campaign to work to end this stigma in Canada.

Recommendation 26

That the Government of Canada develop programs to raise awareness of elder abuse and ensure that seniors are aware of the resources and support that are available to them.

129 Ibid.

130 FEWO, *Evidence*, 1st Session, 42nd Parliament, 2 April 2019, 0945 (Krista James); and FEWO, *Evidence*, 1st Session, 42nd Parliament, 9 April 2019, 1005 (Laura Tamblyn Watts).

131 FEWO, *Evidence*, 1st Session, 42nd Parliament, 2 April 2019, 0950 (Krista James); and FEWO, *Evidence*, 1st Session, 42nd Parliament, 4 April 2019, 0925 (Margaret Gillis).

132 DisAbled Women's Network of Canada, "[Parliamentary Brief](#)," *Submitted Brief*, 29 March 2019.



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Recommendation 27

That the Government of Canada work with its provincial and territorial partners to ensure that culturally and age-appropriate services, including shelters and transition houses as well as legal aid, are available for all senior women who experience any form of violence, regardless of where they live.

APPENDIX A LIST OF WITNESSES

The following table lists the witnesses who appeared before the Committee at its meetings related to this report. Transcripts of all public meetings related to this report are available on the Committee’s [webpage for this study](#).

Organizations and Individuals	Date	Meeting
<p>Canada Mortgage and Housing Corporation</p> <p>Romy Bowers, Chief Commercial Officer</p> <p>Charles MacArthur, Senior Vice-President Assisted Housing</p>	2019/02/21	131
<p>Department for Women and Gender Equality</p> <p>Danielle Bélanger, Director Strategic Policy, Policy and External Relations Branch</p>	2019/02/21	131
<p>Department of Employment and Social Development</p> <p>Patrick Bussière, Director Social Research Division, Strategic and Service Policy Branch</p> <p>Karen Hall, Director General Social Policy Directorate, Strategic and Service Policy Branch</p> <p>Jackie Holden, Senior Director Seniors Policy, Partnerships and Engagement Division, Income Security and Social Development Branch</p> <p>Catherine Scott, Director General Community Development and Homelessness Partnerships Directorate, Income Security and Social Development Branch</p>	2019/02/21	131

Organizations and Individuals	Date	Meeting
<p>Public Health Agency of Canada</p> <p>Franca Gatto, Director Aging, Seniors and Dementia Division, Centre for Health Promotion, Health Promotion and Chronic Disease Prevention Branch</p> <p>Anna Romano, Director General Centre for Health Promotion, Health Promotion and Chronic Disease Prevention Branch</p>	2019/02/21	131
<p>Statistics Canada</p> <p>Sébastien Larochelle-Côté, Editor-in-Chief Insights on Canadian Society</p> <p>Anne Milan, Chief Labour Statistics Division</p>	2019/02/21	131
<p>Dalhousie University</p> <p>Lori Weeks, Associate Professor School of Nursing</p>	2019/02/26	132
<p>First Nations Health Council</p> <p>Tania Dick, Vancouver Island Representative British Columbia</p>	2019/02/26	132
<p>Hearing Health Alliance of Canada</p> <p>Jean Holden, Advisory Board Member Valerie Spino, Advisory Board Member</p>	2019/02/26	132
<p>Pembina Active Living (55+)</p> <p>Alanna Jones, Executive Director Robert Roehle, President</p>	2019/02/26	132
<p>As Individuals</p> <p>Madeleine Bélanger Catherine Twinn, Lawyer</p>	2019/02/28	133
<p>Association québécoise de défense des droits des personnes retraitées et préretraitées</p> <p>Luce Bernier, President Geneviève Tremblay-Racette, Director</p>	2019/02/28	133

Organizations and Individuals	Date	Meeting
CARP Laura Kadowaki, Policy Researcher West Coast Wanda Morris, Chief Advocacy and Engagement Officer West Coast	2019/02/28	133
Réseau FADOQ Philippe Poirier-Monette, Collective Rights Advisor Provincial Secretariat Danis Prud'homme, General Manager Provincial Secretariat	2019/02/28	133
As an Individual Madeleine Bélanger	2019/04/02	135
Association québécoise de défense des droits des personnes retraitées et préretraitées Geneviève Tremblay-Racette, Director	2019/04/02	135
Canadian Centre for Elder Law Krista James, National Director	2019/04/02	135
Réseau FADOQ Philippe Poirier-Monette, Collective Rights Advisor Provincial Secretariat Gisèle Tassé-Goodman, Vice-President	2019/04/02	135
As Individuals Lynn Lecnik Mary Moody Lana Schriver	2019/04/04	136
Canadian Centre for Policy Alternatives Katherine Scott, Senior Researcher	2019/04/04	136
International Longevity Centre Canada Margaret Gillis, President Dr. Kiran Rabheru, Board Chair	2019/04/04	136
CARP Laura Tamblyn Watts, Chief Public Policy Officer	2019/04/09	137

Organizations and Individuals	Date	Meeting
Dalhousie University Lori Weeks, Associate Professor School of Nursing	2019/04/09	137
Pauktuutit Inuit Women of Canada Anita Pokiak, Board Member	2019/04/09	137
As an Individual Amanda Grenier, Professor McMaster University	2019/04/11	138
Women Focus Canada Inc. Oluremi Adewale, Chief Executive Officer, President, Founder Boluwaji Adewale-Olaniru, Program Coordinator	2019/04/11	138
As Individuals Juliette Noskey Colleen Young	2019/04/30	139
Seniors Action Quebec Vanessa Herrick, Executive Director Michael Udy, President	2019/04/30	139
Sheridan College Lia Tsotsos, Director Centre for Elder Research	2019/04/30	139
As Individuals Shirley Allan Arline Wickersham	2019/05/02	140
Canadian Network for the Prevention of Elder Abuse Kathy Majowski, Board Chair	2019/05/02	140
DisAbled Women's Network of Canada Bonnie Brayton, National Executive Director	2019/05/02	140
Egale Canada Helen Kennedy, Executive Director	2019/05/02	140
Native Women's Association of Canada Roseann Martin, Elder Chaneesa Ryan, Director of Health	2019/05/02	140

APPENDIX B LIST OF BRIEFS

The following is an alphabetical list of organizations and individuals who submitted briefs to the Committee related to this report. For more information, please consult the Committee's [webpage for this study](#).

Assaulted Women's Helpline

Association québécoise de défense des droits des personnes retraitées et préretraitées

Canadian Centre for Elder Law

Canadian Dental Hygienists Association

Canadian Frailty Network

Canadian Institutes of Health Research

Canadian Network for the Prevention of Elder Abuse

Canadian Radiology Women

Canadian Research Institute for the Advancement of Women

Coalition citoyenne pour mieux vivre et mieux vieillir

Coalition for Healthy Aging in Manitoba

Congress of Union Retirees of Canada

Cuthbertson, Cathy

Direct Sellers Association of Canada

DisAbled Women's Network of Canada

Hearing Health Alliance of Canada

Interior BC Council on Aging

National Pensioners Federation

Ontario Association of Interval and Transition Houses

Réseau FADOQ

Saskatoon Services for Seniors

Seniors Safety Line

Tobah, Selma

Transportation Options Network for Seniors

Women Focus Canada Inc.

YWCA Hamilton

REQUEST FOR GOVERNMENT RESPONSE

Pursuant to Standing Order 109, the Committee requests that the government table a comprehensive response to this Report.

A copy of the relevant *Minutes of Proceedings* ([Meetings Nos. 131, 132, 133, 135, 136, 137, 138, 139, 140, 147 and 148](#)) is tabled.

Respectfully submitted,

Karen Vecchio
Chair

Supporting Canadian Senior Women who chose to leave the Paid Workforce to Invest in Family and Home

Introduction

During this study, the committee heard from more than fifty witnesses who each offered a perspective worthy of careful consideration. Since women do not become seniors overnight, it is of utmost importance to consider their entire life course when seeking to understand the needs of senior women. Their choices must be respected from the beginning to the end of their lives.

The Conservative members of the committee are submitting this supplementary report to draw special attention to the important contributions made by women who took time away from the paid workforce to raise children and run a household. It is important to understand both the opportunities and the challenges of this choice.

Conservatives remain dedicated to ensuring Canadians get ahead in all areas of their lives and at all points in their journey. Autonomy, choice, and freedom must always be valued and guarded.

The Opportunities

Anita Pokia, a board member at Pauktuutit Inuit Women of Canada, commented to the members on the committee that “everything begins at home with our culture. We try hard with our language, keeping all culture, learning to sew and stuff and also, like I said, in the school. We have to teach our children, because the teaching begins at home and then it spreads out into the community.”¹ Investing in family, volunteering in community, caring for loved ones, and having social fulfillment are all opportunities that spur from women choosing to work in their home.

Ms. Lynn Lecnik, who presented to the committee as an individual, said:

“I don't need a job outside the home to participate in the economic, social and democratic life of Canada. We raise children to be leaders, to be good stewards of their finances and of the world they live in, to be active members of the society they live in and to know how they can make an impact on the law and government in Canada. The way we raise our children is a full participation in the economic, social and democratic life of Canada.”²

For many women, there is a sense of fulfillment and pride that comes with being able to invest significant time into raising their children without needing to work outside the home. To them, nothing is more important than shaping the hearts, minds, and actions of their children.

¹ FEWO, *Evidence*, April 9, 2019, 1005, Ms. Anita Pokia (Board Member, Pauktuutit Inuit Women of Canada)

² FEWO, *Evidence*, April 4, 2019, 0950, Ms. Lynn Lecnik (as an individual)

One witness noted that her choice to be a stay-at-home mom meant she “watched [her children] grow up to become the individuals that they are today. We grew our own food and the children had to help with chores. I believe this helped to impart a sense of responsibility and an awareness of the world around them making good foundations for them to live by. On reflection it was the best choice for me.”³

Along with investing in their family and community, choosing to be a stay-at-home parent often provides women with a sense of voice, meaning, and significance:

“I see much value in the choice I made. Because I stayed at home, I was able to volunteer extensively. I volunteered in my children's schools, at my church, in homeless shelters and I served on the boards of directors of a number of not-for-profit organizations. I helped mobilize two churches to support refugees new to Canada. I was able to donate many hours of time and expertise to organizations and I know that I made a difference to those organizations. I currently mentor four young women, and I know that my experiences provide especially relevant support to two of them, who are stay-at-home mothers. I still volunteer in my church and at a seniors' health centre.... Most importantly, my choice enabled me to be a central influencer in the upbringing of my children.”⁴

“As my children grew older I found there were unique opportunities as a stay-at-home mom. I had found my place. Being at home was meaningful to me and I knew that there was value in what I was doing and who I was reaching.”⁵

Being able to provide care for loved ones of all ages and all backgrounds was also identified as an opportunity afforded to those who chose to take time away from the paid work force to invest in family life:

“I was not one to parent my grandchildren, but I wanted to support them and help them feel loved. We have always been there for our grandchildren, offering them love and support through the good and the bad. Even now we support our grandchildren as they raise their children.... I was not only present in my kids' lives, but also in the lives of their friends. Often over a fresh plate of cookies I would find teenagers opening up about their lives.”⁶

A number of witnesses shared about the dignity of being a stay-at-home parent. For them, this choice produced a sense of value, importance, and voice. Ms. Noskey stated that “being a stay-at-home mom was a privilege and an honour”⁷ and Ms. Young shared that “no dollar value has ever been assigned to such an important and extremely significant job in this world.”⁸

³ FEWO, *Evidence*, April 4, 2019, 1000, Ms. Mary Moody (as an individual)

⁴ FEWO, *Evidence*, May 2, 2019, 1005, Ms. Shirley Allan (as an individual)

⁵ FEWO, *Evidence*, May 2, 2019, 1010, Ms. Arline Wickersham (as an individual)

⁶ *Ibid.*

⁷ FEWO, *Evidence*, April 30, 2019, 0955, Ms. Juliette Noskey (as an individual)

⁸ FEWO, *Evidence*, April 30, 2019, 0950, Ms. Colleen Young (as an individual)

The Challenges

While taking time away from the paid workforce to care for their families is extremely rewarding for many women, it can also result in a number of challenges that are experienced later on in life, when women enter into their senior years.

Many of the witnesses who testified during this study commented on the lack of economic security that stay-at-home mothers experience upon entering senior life. A number of thoughtful reflections were offered:

“Because of my late entry into the paying workforce, I have not had time to prepare adequately for retirement in terms of CPP or independent workplace retirement plans.... I have an OAS, but with my combined allowance of 30 years child-rearing and the CPP I've paid since entering the workforce, I receive less CPP than our medical coverage will be.”⁹

“As I near the end of my working career and look forward to retirement, I believe that my pension will not be sufficient to cover all living costs. It seems that choosing to be a stay-at-home mom penalized me and other women for doing the most important thing in society, which is to make certain that our children are cared for and to contribute to society in this manner.”¹⁰

“Little did I realize that 40 years later that my contributions to family and community would not even remotely compare monetarily to that of my husband or workplace moms.”¹¹

Along with financial inequality, many women also face societal stigma for choosing to stay-at-home and invest in the emerging generation. It was pointed out that society places very little value on the choice some women make to be stay-at-home parents. Ms. Allan summarized this point well when she shared “in the eyes of society, I may be viewed as a failure or my choice as failing.”¹² “Even though society does not seem to place value on the choice I made, I feel this decision was of great value to me, my family and to society as a whole.”¹³

Conclusion

There are many ways to be a successful woman and it's up to each individual to choose her path, which is why economic *choice* is the greatest measure of equality. Do women have the same freedom as men to pursue the career of their dreams? Do women have the same freedom to prioritize caring for a child or loved one as men do if that is what they choose? Does

⁹ FEWO, *Evidence*, April 4, 2019, 1000, Ms. Lana Schriver (as an individual)

¹⁰ FEWO, *Evidence*, April 30, 2019, 0955, Ms. Juliette Noskey (as an individual)

¹¹ Ibid.

¹² FEWO, *Evidence*, May 2, 2019, 1005, Ms. Shirley Allan (as an individual)

¹³ FEWO, *Evidence*, May 2, 2019, 1000, Ms. Shirley Allan (as an individual)

Canada's cultural framework afford women the freedom to choose part-time work over full-time work without feeling of lesser value?

Women should have the freedom to choose the path that is best for them. As Ms. Moody said during her time at committee: "We are not all cut from the same cloth and as women; we will continue to question our choices. We need to feel that we're doing something worthwhile and if it is staying home with our family and contributing to our community, then we should feel good about this."¹⁴

Autonomy must be granted. Freedom must be protected. Choice must be respected.

Recommendations

Although the Conservative members of the Standing Committee on the Status of Women agree with the recommendations outlined in the main report, we feel that special attention needs to be drawn to the needs of senior women who chose to leave the paid workforce for any length of time.

Based on testimony provided at committee, the Conservative members offer the following recommendations:

Tax Breaks:

1. That the Government of Canada explore the option of providing tax breaks to Canadians who have chosen to be stay-at-home parents.^{15 16}

Income Tax Splitting:

2. That the Government of Canada implement tax measures to allow spouses with children under 18 years of age to split their incomes for tax purposes.^{17 18}

¹⁴ FEWO, *Evidence*, April 4, 2019, 1000, Ms. Mary Moody (as an individual)

¹⁵ "What can the government provide for people who are essentially not working? Probably the best thing is just to give more tax breaks for the young people who are trying and struggling, so that they would have enough money." FEWO, *Evidence*, April 4, 2019, 1010, Ms. Lynn Lecnik (as an individual)

¹⁶ "I feel it is important for a parent to have the choice to stay-at-home with their children and to be supported in this choice. The government could support families by allowing income splitting for tax purposes, providing a stay-at-home parent tax benefit, financially supporting senior women who have never engaged in paid work and changing pension legislation for surviving spouses who do not have a private pension." FEWO, *Evidence*, May 2, 2019, 1005, Ms. Shirley Allan (as an individual)

¹⁷ "For women who make this same choice, respecting their choice is important. Family income splitting is important. Letting women keep more of their money by decreasing taxes is important, and financial support for seniors who haven't paid into CPP is important." FEWO, *Evidence*, May 2, 2019, 1005, Ms. Arline Wickersham (as an individual)

¹⁸ "I feel it is important for a parent to have the choice to stay-at-home with their children and to be supported in this choice. The government could support families by allowing income splitting for tax purposes, providing a stay-at-home parent tax benefit, financially supporting senior women who have never engaged in paid work and changing pension legislation for surviving spouses who do not have a private pension." FEWO, *Evidence*, May 2, 2019, 1005, Ms. Shirley Allan (as an individual)

Universal Child Benefit:

3. That the Government of Canada examine and evaluate improvements to the Canada Child Benefit for Canadians who choose to be stay-at-home parents.¹⁹

Pension Funding:

4. That the Government of Canada look to provide adequate pension funding for individuals who have chosen to be stay-at-home parents.^{20, 21}

Vulnerable Senior Women:

5. That the Government of Canada examine disability-related benefits and tax measures to ensure that persons living with disabilities are not penalized financially for increasing the number of hours they work in paid employment.

Supporting New Parents Act:

6. That the Government of Canada ensure there is a federal non-refundable income tax credit that is available for any federal income tax paid under EI parental leave programs.

Languages:

7. That the Government work to ensure newcomer senior women have adequate access to Language Instruction for Newcomers to Canada classes with a specific aim at reducing social isolation of newcomers to Canada.²²

¹⁹ “What about a program for moms choosing to stay-at-home, at least for their children's preschool years—the cost of daycare, times the number of children, times five years—maybe a bond or security investment to be paid to mom, without excess, maybe until 60 or 65 years. That might be a suggestion. Day care for one child, in New Brunswick at least, costs approximately \$800 a month, probably \$1,500 if you have two, so what if you multiplied that \$1,500 a month by 12 months, which is \$18,000, by five years, which is \$90,000, payable with interest? If that was held until the mother did reach retirement, if she chose to do so, \$90,000 over 40 years could be a good investment.” FEWO, *Evidence*, April 4, 2019, 1015, Ms. Lana Schriver (as an individual)

²⁰ “I would like to highly recommend that the government look to provide adequate pension funding for individuals like me who have chosen to stay-at-home for many years in order to raise responsible adults for the society in which we live. It would be ideal if stay-at-home mothers can have a retirement plan where they can make a small contribution and possibly have the government match that amount.” FEWO, *Evidence*, April 30, 2019, 1000, Ms. Juliette Noskey (as an individual)

²¹ “I think it's really imperative as has been said here, and Irene brought it up in the earlier conversation because I was here listening, is there has to be a way for stay- at- home moms to contribute more to a pension plan in some way or some sort of benefit so that if something does happen in their lives where they are a sole provider for their children and their family that they are able to contribute to a pension plan that will sustain them down the road and we won't have 61% of women living below the 20% poverty line in one province alone here in Canada.” FEWO, *Evidence*, April 30, 2019, 1000, Ms. Colleen Young (as an individual)

²² “We really haven't connected all that well with people who speak a different language. That is one of the things we want to address with this grant. We want to figure out how to reach new Canadians, for example, and people who speak a different language, and to somehow have programs that reflect their cultures.” FEWO, *Evidence*, February 26, 2019, 0930, Mr. Robert Roehle (President of Pembina Active Living (55+))

New Horizons:

8. That the Government maintain the New Horizons for Seniors Program and that the government examines ways of modifying the program to sustain funding for a longer duration for larger projects.²³

²³ “The new horizons for seniors program is a grants and contributions program that really works to enhance the quality of life for seniors and their engagement and participation in the community, with a real focus on reducing social isolation. There are two parts to that program. There's the community-based grant aspect of it, which is the majority of the funding in the program, at about \$35 million annually. That is for small, community-based grants of up to \$25,000. Those can be used by community organizations to initiate projects that engage seniors in their community.” FEWO, *Evidence*, February 21 2019, 0925, Ms. Catherine Scott (Director General, Community Development and Homelessness Partnering Directorate, Income Security and Social Development Branch at Department of Employment and Social Development)

NO TIME TO WAIT: Challenges Faced by Senior Women and the Factors Contributing to their Poverty and Vulnerability

*A Minority Report submitted by the New Democratic Party of Canada
To the Government of Canada*

As members of the Standing Committee on the Status of Women heard during testimony on the study of Challenges Faced by Senior Women and the Factors Contributing to Their Poverty and Vulnerability, Canadians are living longer, and the proportion of seniors¹ in Canada is increasing more quickly than any other age group. Women are disproportionately represented among Canadians 65 years of age and older, and women outlive men on average by several years.²

It is important to address the factors contributing to the poverty and vulnerability of senior women in Canada using an intersectional lens. Senior women are more likely than senior men to experience income disparity, which is more severe when intersectional variables are considered. Women of colour, racialized women, Indigenous women,³ LGBTQ2S+ women⁴ and “women with disabilities are not a homogenous group. There's a very broad range of considerations; again, the intersectional analysis is quite critical here.”⁶ As the FEWO report indicates, intersectional impacts contribute to even greater income disparity⁷ and health outcomes throughout women’s lives and into their senior years.

New Democrats have long held that Canada needs a National Strategy on Ageing⁸ that will bring together all levels of government to create and implement meaningful solutions for Canadian seniors. While this report contains recommendations specific to the unique needs of senior women facing vulnerability and poverty in Canada, we understand that many of the

¹ The term “seniors” is used by the Government of Canada and is therefore used by the Committee in this report. The Committee uses the term to describe individuals in Canada aged 65 years and older, unless otherwise indicated. The Committee acknowledges that the term “seniors” can sometimes carry ageist connotations.

² House of Commons Standing Committee on the Status of Women (FEWO), [Evidence](#), 1st Session, 42nd Parliament, 21 February 2019, 0950 (Anne Milan, Chief, Labour Statistics Division, Statistics Canada); and 1035 (Sébastien Larochelle-Côté, Editor-in-chief, Insights on Canadian Society, Statistics Canada).

³ FEWO, [Evidence](#), 1st Session, 42nd Parliament, 2 May 2019, 0910 (Chaneesa Ryan, Director of Health, Native Women's Association of Canada).

⁴ Canadian Centre for Elder Law, [“Brief,” Submitted Brief](#), 28 March 2019

⁵ House of Commons Standing Committee on the Status of Women FEWO, [Evidence](#), 1st Session, 42nd Parliament, 4 April 2019, 0850 (Katherine Scott).

⁶ House of Commons Standing Committee on the Status of Women (FEWO), [Evidence](#), 1st Session, 42nd Parliament, 02 May 2019, 0855 (Bonnie Brayton, DisAbleD Women’s Network of Canada)

⁷ FEWO, [Evidence](#), 1st Session, 42nd Parliament, 4 April 2019, 0850 (Katherine Scott); and FEWO, [Evidence](#), 1st Session, 42nd Parliament, 21 February 2019, 0950 (Anne Milan).

⁸ New Democratic Party of Canada, National Strategy on Aging in Canada, [Policy Document](#)

recommendations included in the seniors' strategy would be effective in addressing the increased risks for vulnerability and poverty faced by senior women in Canada.

Therefore, New Democrats call upon the Government of Canada to adopt and implement a National Strategy on Ageing to reduce risks of vulnerability and poverty faced by senior Women in Canada.

For the purposes of this report, priorities for consideration are grouped into the categories of health, housing, financial security, justice, inclusive society, and reconciliation. It should be noted that these are by no means an exhaustive list of issues.

Evidence and recommendations based on these priorities are as follows:

HEALTH:

"The cost of medication certainly is a pressing concern for many seniors, just in reviewing their histories.... They may or may not have private coverage. There are huge gaps in terms of what the public system covers. As a consequence, seniors who are facing high rents or transportation challenges and the like have precious few dollars to devote to medication. It remains a paralyzing concern for many... I believe you're talking about a national pharmacare program. It's a critical piece of infrastructure and is really a huge gap in the Canadian health care system. Proportionately, it does detrimentally impact seniors to a greater extent. Our organization has been advocating for a universal single-payer health care model.

We understand that there's an interim report out from Dr. Hoskins and that the government itself is looking at a model and putting it forward. We would encourage, from our own research, support of a single-payer universal system in order to provide a foundation for everyone, as opposed to a "fill in the gaps" system"⁹

Therefore, New Democrats call upon the Government to implement a universal, comprehensive, single-payer pharmacare program to ensure that low-income seniors can afford the medication they need.

"Women told us the lack of publicly-funded dental care is also a significant barrier to well-being, given their low-incomes in old age."¹⁰

Therefore, New Democrats call upon the Government to implement a universal comprehensive dental and vision care program for low income seniors.

⁹ House of Commons Standing Committee on the Status of Women (FEWO), [Evidence](#), 1st Session, 42nd Parliament, 4 April 2019, 0920 (Katherine Scott, Canadian Centre for Policy Alternatives)

¹⁰ Canadian Centre for Elder Law, [Brief](#), Submitted 1 April 2019

“In terms of supporting senior women survivors of violence and abuse, we learned that violence has a significant impact on ageing. Some women do experience violence in old age. Others experienced violence as children or younger women that continues to impact their quality of life. In particular, historic trauma has had an enduring impact on the lives of indigenous older women. Keeping their children and youth safe is a priority.”¹¹

Therefore, New Democrats call upon the Liberal government to fulfill its promise of a national action plan to end gender-based violence, including focus on elder abuse.

And therefore, New Democrats call upon the Government of Canada to immediately demonstrate leadership and coordinate federal, provincial, territorial, and municipal government responses to protect women, senior women and girls against violence, via a National Action Plan – to ensure equality of access to services across and within jurisdictions in policies, laws, and education, and to prevent and address violence against women and girls – and that the National Action Plan be developed working in partnership with Indigenous peoples and communities.

HOUSING:

The committee heard from several witnesses on the importance of safe, affordable housing as a factor contributing to senior women’s poverty and vulnerability. New Democrats stand with progressives worldwide who understand that access to safe, affordable housing is a human right. Canadians are experiencing a housing affordability crisis that has compounding and intersectional impacts on senior women when we consider that they have experienced pay inequities throughout their lifetime as a result of the gender wage gap and providing unpaid care work. The impacts on diverse groups of women – racialized women, disabled women, women of colour, immigrant women and Indigenous women, are even greater. The Canadian Government has a responsibility to ensure that safe, affordable housing is accessible to all Canadians, including senior women.

“Appropriate housing is a basic human right for all Canadians. For older people, that means clean, accessible housing that meets their needs for independence, dignity, safety and social participation, yet here is the reality for older women in Canada: 27% are in core housing need, meaning after housing costs they don’t have enough money for food, medication and transportation.”¹²

“What this tells us is that many have little income above and beyond what’s available through basic pensions. They have the basic OAS/GIS, and a modest CPP, depending on their work history. It also tells us why, for instance, core housing need is so acutely high among older women; in particular, women living on their own. It tells us why many face

¹¹ House of Commons Standing Committee on the Status of Women (FEWO), *Evidence*, 1st Session, 42nd Parliament, 2 April 2019, 0920 (Krista James, Canadian Centre for Elder Law)

¹² House of Commons Standing Committee on the Status of Women (FEWO), *Evidence*, 1st Session, 42nd Parliament, 4 April 2019, 0900 (Margaret Gillis, International Longevity Centre Canada)

untenable choices each day of paying for the high cost of housing, medication, food or other basics.”¹³

Therefore, New Democrats call upon the Government of Canada to immediately introduce legislation that recognizes housing as a basic human right.

¹ House of Commons Standing Committee on the Status of Women (FEWO), *Evidence*, 1st Session, 42nd Parliament, 2 April 2019, 0920 (Krista James, Canadian Centre for Elder Law)

¹ House of Commons Standing Committee on the Status of Women (FEWO), *Evidence*, 1st Session, 42nd Parliament, 4 April 2019, 0900 (Margaret Gillis, International Longevity Centre Canada)

And therefore, New Democrats call upon the Government of Canada's to immediately invest, without delay, in affordable housing as part of its National Housing Strategy, to address the housing affordability crisis that disproportionately affects senior women.

And therefore, New Democrats call upon the Government of Canada to include in its National Housing Strategy, in partnership with provinces and territories, a specific stream addressing senior care and that the federal government ensure that this is enforced across all jurisdictions in Canada.

FINANCIAL SECURITY:

The committee heard from several witnesses that financial security in senior years is hugely affected by income disparities experienced by women during their lifetime leading up to the age of 65. These income disparities are the result of the gender pay gap that pays women less than men for work of equal value, as well as time spent out of the paid workforce raising children and caring for family members in the home. All these factors result in decreased ability to contribute to pension plans, be they employer-provided, private contributions, or contributions to Canada Pension Plan.

“divorce, separation or widowhood may alter women's income or housing through, for example, the move from home ownership to rented accommodation; how the onset of illness or impairment may prompt changes to labour, income, mobility or housing through, for example, part-time work or early departure as a result of injury; the short- and long-term impacts of immigration related to care trajectories, including, for example, how low income and/or reduced pension contributions may affect financial security in late life; and transitions between locations of care, such as home, hospital and long-term care....Disadvantage can accumulate across the life course through structures that produce inequality and heighten insecurities and risk. For example,

¹³ House of Commons Standing Committee on the Status of Women (FEWO), *Evidence*, 1st Session, 42nd Parliament, 4 April 2019, 0850 (Katherine Scott, Canadian Centre for Policy Alternatives)

women's labour and care trajectories may result in poverty, which can have knock-on effects in relation to housing stability, access to care, transportation, health and well-being... Proposed solutions include strengthening public pension to protect those most in need, including consideration for unpaid care as part of the calculation; developing public care systems and accessible public transportation, particularly for low-income women; the provision of social housing that is safe and affordable and can accommodate changing mobility needs; and ensuring justice across programs to ensure that situations such as being discharged from hospital to the street do not occur.”¹⁴

“we have three recommendations related to income security. We recommend that the government enhance the old age security and guaranteed income supplement programs; amend the Canada pension plan to include a dropout provision, parallel to the child rearing provision, that would be applicable to all years of full-time family caregiving; and develop programs providing better financial, housing, and other supports to senior women who are the primary caregivers of underage children, particularly indigenous women. What happens often is that eligibility terminates when you turn 65, but caregiving does not stop.”¹⁵

“One of the key policy issues that emerged from this research was the loss of pensionable earnings experienced by unpaid family caregivers. CCEL recommended an expansion of the CRP to include eldercare and other forms of adult caregiving or the introduction of a parallel adult caregiving drop-out provision.”¹⁶

“Caregiving has a significant impact on older women’s lack of income security during retirement years. Many Women commented that their Canada Pension Plan payments were very low because they had spent many years out of the paid work force caring for children and spouses. As one woman explained, succeeding generations of women may face the same fate, Women on CPP Disability who have custody of their grandchildren pointed out that it is unfair that they lose the child benefit when they turn 65 and go on regular CPP”¹⁷

Therefore, New Democrats call on the Government to amend the Canada Pension Plan to include drop-out provisions parallel to the Child-Rearing Provision that would be applicable to all years of full-time family caregiving, including care of elders, extended family and community members.

¹⁴ House of Commons Standing Committee on the Status of Women (FEWO), [Evidence](#), 1st Session, 42nd Parliament, 11 April 2019, 0939 (Amanda Grenier, McMaster University, as an individual)

¹⁵ House of Commons Standing Committee on the Status of Women (FEWO), Evidence, 1st Session, 42nd Parliament, 2 April 2019, 0945 (Krista James, Canadian Centre for Elder Law)

¹⁶ Canadian Centre for Elder Law, [Brief](#), Submitted 1 April 2019

¹⁷ Canadian Centre for Elder Law, [Brief](#), Submitted 1 April 2019

New Democrats call on the Government to amend the rules for CPP such that women receiving a disability benefit and caring for a grandchild receive continued CPP child care benefits after the age of 65.

New Democrats would therefore amend Recommendation 3 of the Standing Committee's report to read:

That the Government of Canada make changes to the Guaranteed Income Supplement (GIS) and Old Age Security (OAS) programs to improve senior women's economic security such as ensuring adequate benefits to lift every senior woman out of poverty; ensuring that senior women who are financially vulnerable, including newcomers to Canada, are aware of and have access to OAS; increasing the GIS benefits and earning exemption; and extending GIS benefits of a deceased recipient to a surviving spouse for the duration of the surviving spouse's lifetime.

The Committee heard about the need to ensure workers in the caregiving industry have access to secure work and adequate pay to provide quality care to senior women in long-term care. These workers are more often than not, women themselves and experience all the negative factors contributing to their own poverty and vulnerability as seniors. A publicly funded system of home and long-term care for seniors would ensure sustainability, not only for senior women requiring these services, but for the caregivers providing them.

New Democrats support the increase of targeted funding to provinces and territories for the purposes of supporting home and community care and creating national standards and guidelines for standardization of care across the country ¹⁸enforceable under the Canada Health Act.

In addition, lack of protection for employee pension plans when companies declare bankruptcy, such as the Sears Canada bankruptcy, demonstrate the potential for senior women to be left with pension incomes that are drastically reduced from what these same women had expected to receive after retirement. Pension contributions are deferred wages, and the refusal to acknowledge this fact on the part of corporations and the Government of Canada is unconscionable.

New Democrats call on the Government of Canada to implement NDP MP Scott Duvall's Private Member's Bill C-384 to amend the Bankruptcy and Insolvency Act (BIA) and the Companies Creditors and Arrangement Act (CCAA) to bring any pension plan fund to 100% before paying any secured creditors, and to prevent a company from stopping payment of any retirement benefits during any proceeding under the BIA or CCAA.

¹⁸ Selma Tobah, [Brief](#), Submitted 1 April 2019

JUSTICE:

In Canada and around the world, violence against women is shockingly prevalent. Domestic violence or Intimate Partner Violence is still one of the most common forms of violence against women in Canada. Indigenous women are seven times more likely to be murdered than non-Indigenous women. Thousands of Indigenous women in Canada have been murdered or gone missing over the past 30 years. Sexual assaults experienced by Indigenous women are more than three times that of non-Indigenous women, and women with disabilities experience rates of violence nearly three times higher than non-disabled women.¹⁹

“Prevalence studies show that between 15% and 30% of older women report intimate partner violence at some time over their life (e.g. Bonomi et al., 2007). Incidence studies showed that 8.6% of currently partnered women experienced intimate partner violence since turning age 55 (Zink et al., 2005). Older women who experience intimate partner violence require appropriate access to services that meets their needs. Domestic violence services are often not attuned to meeting the needs of older women (LeBlanc & Weeks, 2013). In addition, adult protection services are often not attuned to the dynamics of intimate partner violence. The impact of leaving a relationship in later life can be even more dramatic than for younger women, such as a greater impact of the loss of financial security combined with poor health reducing the ability to earn an income, and the loss of a long-term home and pets (Hightower, Smith, & Hightower, 2006).”²⁰

Therefore, New Democrats renew their call to the Liberal government to fulfill its promise of a national action plan to end gender-based violence, including a focus on elder abuse.

And New Democrats call upon the Government of Canada to immediately demonstrate leadership and coordinate federal, provincial, territorial, and municipal government responses to protect women, senior women and girls against violence, via a National Action Plan – to ensure equality of access to services across and within jurisdictions in policies, laws, and education, and to prevent and address violence against women and girls – and that the National Action Plan be developed working in partnership with Indigenous peoples and communities.

INCLUSIVE SOCIETY:

The committee heard from several witnesses regarding the need to create and nurture an inclusive environment with accessibility to services for diverse senior women. Access long term care options for senior women in the LGBT2S+ community was highlighted as a priority.

¹⁹ DisAbled Women’s Network of Canada, “Legislation Policy and Service Responses to Violence Against Women with Disabilities & Deaf Women”, December 2018, URL: <https://dawnacanada.net/projects/lps/>

²⁰ Lorie Weeks, Dalhousie University, [Speaking Notes](#), Submitted 15 March 2019

*“Shortages of long-term care beds disproportionately affect older women. For Canadians age 80 and older, women are much more likely than men to live in a nursing home, chronic care or long-term care hospital or residence for senior citizens (Statistics Canada, 2011). While enhancing community-based services such as homecare is imperative (Better Home Care in Canada: A National Action Plan, 2016), these services can not meet the needs of all older adults who experience physical and/or cognitive frailty and do not have family or friends able to care for them. Those who identify as LGBTQ2+ are particularly vulnerable as they experience invisibility and discrimination in accessing community-based health and social services and long-term care (Brotman, Ryan & Cormier, 2003; Furlotte, Gladstone, Cosby, & Fitzgerald, 2016).”*²¹

In addition, the availability of accessible, safe and affordable public transit was also identified by several witnesses as fundamental to providing community access for senior women and reducing their risk of vulnerability. Of particular importance is access to transit options for disabled women and for women in rural and remote locations. Access to transit should be viewed as a human right. It is one of the social determinants of health and should be funded accordingly.²²

*“research indicates that women with disabilities are more likely to be the target of sexual assaults in transit environments. In terms of accessible or specialized transit usage among women with disabilities, the risk increases with the severity of disability. A lack of access to information about transportation and travel, coupled with limited financial assistance, prevents women with disabilities from fully participating in social life. Of the women who report either a severe or very severe disability, 46% report difficulty in using public or specialized transportation. For women in the north, of course, this is particularly true.”*²³

Therefore, New Democrats call upon the Government of Canada to recognize its obligations under the UN Committee for Disabled Persons and develop policies and programs to address the intersectional impacts of disability on women as they progress through the workforce, family life and age.

²¹ Lorie Weeks, Dalhousie University, [Speaking Notes](#), Submitted 15 March 2019

²² Canadian Research Institute for the Advancement of Women, [Brief](#), Submitted 5 April 2019

²³ House of Commons Standing Committee on the Status of Women (FEWO), [Evidence](#), 1st Session, 42nd Parliament, 2 May 2019, 0855 (Bonnie Brayton, DisAbled Women’s Network of Canada)

RECONCILIATION:

The committee heard from several witnesses who spoke to the gaps in services, programs and care for senior women in the Indigenous community.

*“First nations women aged 50 to 64 have decreased access to primary care outside of hospitals. As I mentioned earlier, it depends on how we purchase services, and how isolated and remote the communities are. It’s a general trend, across the board, for most communities purchasing those services, and having access to continual, consistent, adequate and safe primary health care for communities, particularly for our elders....”*²⁴

*“There are no facilities in Inuit Nunangat for dementia care. As a result, elders are routinely being sent to residential care facilities thousands of kilometres away. Here in Ottawa, there are around 30 Nunavummiut elders at Embassy West Senior Living. In my region, because of the lack of long-term care facilities, our elders are being sent to facilities in Inuvik and Yellowknife, which often have long wait-lists. We should not have to send our elders out of our communities or down south for specialized care. Saying that it is challenging and expensive to provide care for Inuit Nunangat is not an excuse... Many of our elders who are being sent out of Inuit Nunangat to the south for care are the same elders who experienced colonization and residential schools first-hand, only this time they are being sent away and will never return. First they took our children and now they are taking our elders. Our families and communities are losing our elders. They should not be removed from their families, traditional foods, language, culture and environment. In another 50 years, will there be another payout and an apology for this? This is not reconciliation.... Inuit women are the main providers of care for family members, including elders. The federal government must take leadership in consultation with Inuit women to develop a solution to provide for dignity and better quality of life for our elders. This requires a dual investment, both in facilities that incorporate our way of life and in building capacity within our own communities so that we can take of our elders.”*²⁵

New Democrats call upon the Government of Canada to respect its obligations to reconciliation with Indigenous people and ensure that services for senior women such as home care, extended care, and homeless shelters are available locally without forcing elders to relocate long distances from their families and communities.

²⁴ House of Commons Standing Committee on the Status of Women (FEWO), *Evidence*, 1st Session, 42nd Parliament, 26 February 2019, 1000 (Tania Dick, Vancouver Island Representative, British Columbia, First Nations Health Council)

²⁵ House of Commons Standing Committee on the Status of Women (FEWO), *Evidence*, 1st Session, 42nd Parliament,, 9 April 2019, 0950 (Anita Pokiak, Pauktuutit Inuit Women of Canada)

SUMMARY:

National leadership is long overdue to coordinate responses to the needs of senior women in Canada experiencing poverty and vulnerability; yet successive Liberal and Conservative governments have failed to act. To date, the Trudeau government has failed to translate its feminist rhetoric into real change. As the curtain falls on the 42nd Parliament and we move closer to the 2019 Federal Election, Canadians will remember that governments have a responsibility to deliver affordability, safety and security in the form of accessible public services – health care, affordable housing, child care, pension security, a clean environment and sustainable energy solutions. All of these are achievable, affordable and sustainable if there is the political will to accomplish them. New Democrats are ready to get to work on these goals now. Canadians have had enough of empty promises anchored in a future beyond the next election. We don't have time to wait for life to get better. Senior women don't have time to wait. The time to act is now.

New Democrats urge the Canadian government to demonstrate leadership by walking the talk, and by dedicating the political and financial support, resources and funding to meet the needs of Canada's senior women. It's beyond time to put words into action.

FINAL NOTE:

A word about the process by which this report was undertaken and produced: In our opinion, the overly-ambitious schedule adopted by the Liberal majority on this committee at the beginning of the Parliamentary session was designed to create the illusion of Liberals working diligently for Canadians rather than producing a fulsome document and recommendations. As a result, this dissenting/supplementary report is being drafted at the same time as the committee is finalizing its draft report; any overlaps between the two reports are the result of drafting our dissenting report without having a final committee report to work from or rebut. This lack of consideration from the government in planning ahead does not serve the witnesses who provided testimony in the hopes of contributing to a substantive and meaningful report; nor does it respect the staff, analysts and translators who are required to produce these reports with inadequate time and resources. In the future, we hope that the standing committee take this into consideration when setting future agendas.

Respectfully submitted on behalf of the New Democratic Party