



West Coast Legal Education and Action Fund

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Via Online Submission

Select Standing Committee on Finance and Government Services
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Submission to the Standing Committee on Finance and Government Services Budget 2020 Consultations

Introduction

There is overwhelming research showing that crises tend to roll back even the smallest gains societies haven taken toward achieving a more gender just world. We are currently seeing this phenomenon in practice. The COVID-19 pandemic is having a devastating impact on gender justice in BC and across the world.

As the Standing Committee on Finance and Government Services (“the Committee”) assesses where to allocate provincial resources during this time of great need, we urge you to keep front of mind the following fact: if we do not urgently scale up efforts to combat gender inequality, we will see long-term and major setbacks to the realization of gender justice in BC. Accordingly, these submissions highlight the correlation between the COVID-19 pandemic and rising gender inequality. We offer two concrete actions the government should urgently take to address deepening gender inequalities and, in particular, to combat gender-based violence:

- 1. Task and resource the Ministry of Health in the upcoming budget year to fund and coordinate an improved *health* response to sexual assault in BC; and**
- 2. Fund Legal Aid BC to ensure full and comprehensive legal representation for child support applications if the recipient or their child (children) are at risk of family violence.**



About Us

West Coast LEAF is a BC-based legal advocacy organization. Our mandate is to use the law to create an equal and just society for all women and people who experience gender-based discrimination. In collaboration with community, we use litigation, law reform, and public legal education to make change. In particular, we aim to transform society by achieving: access to healthcare; access to justice; economic security; freedom from gender based violence; justice for those who are criminalized; and the right to parent.

COVID-19 and rising gender inequality in Canada

The COVID-19 pandemic, like many crises before it, has exacerbated existing gender inequalities. Women and gender non-conforming people¹ bear the brunt of the economic and social burdens of the pandemic, while also leading the frontline health and service response. The correlation between the COVID-19 pandemic and gender injustice takes multiple forms including:



¹ We use the phrase “gender non-conforming” in these submissions as an umbrella term to refer to gender identities and/or gender expressions that differ from cultural or societal expectations based on assigned sex.



- **Women and gender non-conforming people have disproportionately lost income during the pandemic.** Women and gender non-conforming people are over-represented in sectors most impacted by the pandemic including hospitality, retail, and service sectors² as well as in low-wage, part-time, and informal employment. They have not only been the ones most likely to lose their sources of income during the pandemic, they are also the ones least likely to benefit from emergency financial supports because eligibility criteria for government programs do not factor in these workers' lived experiences and particular needs.³
- **Women's care responsibilities have drastically increased.** Because of socially constructed norms, women in Canada regularly perform, on average, three times as much unpaid care work as men.⁴ Women's unpaid care work has drastically increased during the pandemic because of school closures and higher rates of illnesses among family and community members. Research shows that additional family responsibilities undermine women's participation and advancement in the labour market, increase the economic burden on women-led single-parent households, and undermine women's mental and physical health.⁵ While it is early to assess the magnitude of the impact that the pandemic will have on women's participation in the labour market, the May 2020 Statistics Canada Labour Force Survey found that, among parents, women saw increased loss of hours of work and lower rates of increases in employment than men.⁶
- **The COVID-19 pandemic has exacerbated gender-based violence.** Data collected by the federal ministry of women and gender equality suggests that rates of gender-based violence have increased by approximately 20 – 30%.⁷ These increased rates of violence can be attributed to added economic stressors, the imposition of quarantine and self-isolation measures, higher rates of harassment

² iPolitics, “Youth, women, precarious workers bear brunt of COVID-19 job losses, Statistics Canada finds” (Apr 9, 2020) <<https://ipolitics.ca/2020/04/09/youth-women-precarious-workers-bear-brunt-of-covid-19-job-losses-statistics-canada-finds/>>.

³ Yalnizyan, A. et al, “Canada Emergency Response Benefit Eligibility Issues and Solutions as of April 3, 2020” Atkinson (April 3, 2020) <https://atkinsonfoundation.ca/site/uploads/2020/04/Canada-Emergency-Response-Benefit_Yalnizyan_40720.pdf>;

⁴ Statistics Canada “Time use: Total work burden, unpaid work, and leisure” (July 30, 2018) <<https://www150.statcan.gc.ca/n1/pub/89-503-x/2015001/article/54931-eng.htm>>.

⁵ Statistics Canada “Time use: Total work burden, unpaid work, and leisure” (July 30, 2018) <<https://www150.statcan.gc.ca/n1/pub/89-503-x/2015001/article/54931-eng.htm>>.

⁶ Statistics Canada “Labour Force Survey, May 2020” (June 5th 2020) <<https://www150.statcan.gc.ca/n1/daily-quotidien/200605/dq200605a-eng.htm>>.

⁷ CBC News “Minister says COVID-19 is empowering domestic violence abusers as rates rise in parts of Canada” (April 27, 2020) <<https://www.cbc.ca/news/politics/domestic-violence-rates-rising-due-to-covid19-1.5545851>>.



against frontline workers, and increased risks associated with changing relationship and housing structures.

- ***Life-saving programs have been scaled back, become overburdened or less accessible.*** In crises, sexual and reproductive health as well as gender affirming care is often sidelined as measures are put in place to respond to the spread of the pandemic.⁸ For instance, some anti-violence programs have reported having to temporarily close or reduce capacity in order to ensure they can serve clients safely.⁹ At the same time, some anti-violence programs have reported increased demand of 30 – 300%¹⁰, while others have reported a decline in the use of services likely related to a variety of pandemic-related factors including: the inability to call for help when isolating with an abuser; concerns about COVID-19 transmission; the lack of accessible and affordable programs in remote communities; and perceptions about the availability of programs.¹¹ Life-saving services and programs are disproportionately inaccessible to cis women, transgender and gender non-conforming people in general, and particularly so where significant, additional barriers to access exist, including through their membership in the following communities: Black, Indigenous or people of colour, status as an immigrant, refugee or undocumented person, work in the sex trade, ability/disability status, experience of homelessness and residence in remote parts of the province.¹²
- ***The COVID-19 pandemic has worsened the access to justice crisis which disproportionately impacts people marginalized on the basis of gender.*** The crisis has resulted in limited court operations, increased use of remote-based and novel court processes and reduced support services at a time of increased social

⁸ Action Canada for Sexual Health and Rights “Joint statement on essential abortion care during COVID-19” (March 20, 2020) <<https://www.actioncanadashr.org/news/2020-03-20-joint-statement-essential-abortion-care-during-covid-19>>.

⁹ National Observer “A spike in domestic violence happening in Toronto due to COVID-19 experts say” (April 28, 2020) <<https://www.nationalobserver.com/2020/04/28/news/spike-domestic-violence-happening-toronto-due-covid-19-experts-say>>.

¹⁰ Global News “Calls to Vancouver domestic-violence crisis line spike 300% amid COVID-19 pandemic” (May 7, 2020) <<https://globalnews.ca/news/6789403/domestic-violence-coronavirus/>>; National Observer “A spike in domestic violence happening in Toronto due to COVID-19 experts say” (April 28, 2020) <<https://www.nationalobserver.com/2020/04/28/news/spike-domestic-violence-happening-toronto-due-covid-19-experts-say>>.

¹¹ National Observer “A spike in domestic violence happening in Toronto due to COVID-19 experts say” (April 28, 2020) <<https://www.nationalobserver.com/2020/04/28/news/spike-domestic-violence-happening-toronto-due-covid-19-experts-say>>.

¹² Canadian Association of Midwives and the National Aboriginal Council of Midwives “Reproductive Justice during the COVID-19 Pandemic: A Call to Action from Midwives” (May 12, 2020) <https://canadianmidwives.org/wp-content/uploads/2020/05/ReproductiveJusticeCallActionCOVID19_VF_ENG_20200512.pdf>.



and economic stressors. In the case of family law, as rates of domestic violence increase, health care directives complicate parenting arrangements, and single-parent families, most of whom are led by women, struggle to make ends meet, an already overburdened family law system has become even less accessible.

- ***Women, particularly racialized and migrant women, make up the under-resourced, overburdened frontline.*** More than half of all women workers are employed in the ‘5C’ occupations deemed essential during the COVID-19 pandemic: care, catering, cashiering, cleaning and clerical.¹³ Women also make up 90% of nurses and personal support workers.¹⁴ These workers and their families are at heightened risk of exposure to COVID-19, their work is drastically undervalued in part because of gendered valuation of work, and they have been working in challenging conditions. In one survey of health care workers, almost half of respondents said they needed more mental health supports, additional medical staff in health care facilities, and more protection equipment.¹⁵

Recommendations for combatting rising gender inequality in BC

- 1. The Ministry of Health must be tasked and resourced in the upcoming budget year to fund and coordinate an improved *health* response to sexual assault in BC.**

In May 2020, the provincial government announced the most significant investment in community-based sexual assault services in decades. We were heartened to see that this government took the calls of survivors and anti-violence experts seriously and moved to increase funding for these life-saving programs by \$10 million over three years. While this is a significant and long over-due first step, these funds are unlikely to come anywhere close to meeting the needs of survivors of sexual assault.

As a result of cuts starting in 2002, anti-violence programs in BC have been extremely underfunded and overburdened. In addition to funding cuts, in the wake of the #MeToo

¹³ Canadian Centre for Policy Alternatives “COVID-19 crisis response must address gender faultlines” (March 20, 2020) <<http://behindthenumbers.ca/2020/03/20/covid-19-crisis-response-must-address-gender-faultlines/>>.

¹⁴ Unifor “Pandemic highlights pay gap for frontline, mostly women, workers” (April 2, 2020) <<https://www.unifor.org/en/whats-new/news/pandemic-highlights-pay-gap-frontline-mostly-women-workers>>.

¹⁵ The Star “Canadian health workers on COVID-19 front line say they need mental health support, poll indicates” (April 16, 2020) <<https://www.thestar.com/news/canada/2020/04/16/canadian-health-workers-on-covid-19-front-line-say-they-need-mental-health-support-poll-indicates.html>>.



movement, many of these programs saw drastic increases in demand.¹⁶ The pandemic has posed new challenges for the anti-violence sector. Programs have lost fundraising opportunities as a result of the pandemic, yet many are seeing increased demand in the range of 30-300%.¹⁷ Some programs, particularly those serving remote communities, have had to adapt their services including their ability to provide in-person services, hospital accompaniment, and outreach to comply with health directives.¹⁸

Gender-based violence has always been a crisis here in BC with approximately 40% of women reporting having experienced at least one sexual assault since the age of 15.¹⁹ The fact that such a significant proportion of society lives under a constant threat of severe violence is why sexual assault is regarded by many anti-violence advocates as a never-ending war waged across gender lines. As a society, we must view sexual assault for the crisis it is and respond to it with the same vigour and urgency we're applying to other crises in BC.

This requires us to take two urgent steps. First, we must dedicate substantive resources to responding to sexual assault as a *health care crisis*. Second, we must think outside the box and imagine a different, better provincial approach to addressing sexual assault. Both COVID-19 and the protests against state violence have shed a bright light on the fact that what our society needs most is greater investment in community and individual health and well-being. We know this is also the case with sexual assault.

Sexual assault is a justice issue, but it is first and foremost a public health issue. Most survivors of sexual assault need pathways to safety and wellness that are not contingent on reporting the assault. We have heard over the last few weeks that this is particularly true for survivors from communities who, while disproportionately impacted by sexual assault, are also the ones most likely to feel unsafe reporting to police.

Despite knowing for some time now that sexual assault is primarily a health care issue and one that requires a health care–driven response, it is precisely the health care needs of survivors of sexual assault that, until recently, have received little attention and funding. As an example, recent research we undertook alongside the Ending Violence Association

¹⁶ Moreau, Greg. 2019. Police-reported Crime Statistics in Canada, 2018. Ottawa: Statistics Canada. https://www150.statcan.gc.ca/n1/en/pub/85-002-310_x/2019001/article/00013-eng.pdf?st=Y-h-ujjK.

¹⁷ National Observer “A spike in domestic violence happening in Toronto due to COVID-19 experts say” (April 28, 2020) <<https://www.nationalobserver.com/2020/04/28/news/spike-domestic-violence-happening-toronto-due-covid-19-experts-say>>.

¹⁸ National Observer “A spike in domestic violence happening in Toronto due to COVID-19 experts say” (April 28, 2020) <<https://www.nationalobserver.com/2020/04/28/news/spike-domestic-violence-happening-toronto-due-covid-19-experts-say>>.

¹⁹ Adam Cotter & Laura Savage, “Gender-based violence and unwanted sexual behaviour in Canada, 2018: Initial findings from the Survey of Safety in Public and Private Spaces” (5 December 2019), Juristat, at 23 <<https://www150.statcan.gc.ca/n1/pub/85-002-x/2019001/article/00017-eng.htm>>.



of British Columbia (“EVA B.C.”) showed that wait-lists for counselling services for survivors of sexual assault across the province average approximately two years.

Shortages in health care services for survivors of sexual assault are unsurprising, given that provincial funding is limited, and where it does exist, it is heavily directed at the justice sector's response to sexual assault. While only 5 percent of sexual assaults are reported to police, 62 percent of provincial funding on responding to sexual assault against victims age 15 years or older is directed to justice. In 2018, BC only spent \$13 million on health care for survivors of sexual assault and a mere \$7 million on crisis and victim support. By contrast, we spent \$32 million on the justice response to sexual assault.²⁰

Not only does the justice system only respond to a tiny fraction of assaults; it also seldom meets the needs of survivors.²¹ Survivors of sexual assault need a system of coordinated care, including trauma-informed and culturally safe emergency crisis response teams; access to specialized sexual assault nurse examiners; urgent and long-term medical care, including access to counselling; and support in accessing housing and other community services.

Trauma-informed and culturally safe community-based emergency support services are essential for mitigating the long-term harms experienced by survivors which can include post traumatic stress disorder, anxiety, depression, and even suicidal ideations.²² In fact, research overwhelmingly shows that survivors experience better post-assault outcomes if they access trauma-informed and culturally safe care immediately following the assault.²³ Given that the current pain and suffering-related costs reach an estimated \$2 billion annually²⁴ across Canada and \$190 million in BC alone, funding these essential services is also likely to bring significant long-term economic benefits for survivors and society more broadly.

Accordingly, we must reimagine and respond to sexual assault as the health care crisis it is. We can do this by engaging the leadership of the Ministry of Health to fund and coordinate an improved response to sexual assault in BC. A health care-centered

²⁰ These estimates are based on 2018 BC data.

²¹ Prochuk, Alana. 2018. We are Here: Women’s Experiences of the Barriers to Reporting Sexual Assault. West Coast LEAF. <<http://www.westcoastleaf.org/wp337content/uploads/2018/10/West-Coast-Leaf338dismantling-web-final.pdf>>.

²² Sit, Victoria and Lana Stermac. 2017. “Improving Formal Support After Sexual Assault: Recommendations from Survivors Living in Poverty in Canada.” *Journal of Interpersonal Violence*. 1- 21.

²³ Ullman, Sarah et al. 2007. “Structural Models of the Relations of Assault Severity, Social Support, Avoidance Coping, Self-Blame, and PTSD Among Sexual Assault Survivors.” *Psychology of Women Quarterly* 31(1): 23-37.

²⁴ McInturff, K “The gap in the gender gap: violence against women in Canada” *Canadian Centre for Policy Alternatives* (July 2013) at 7
<https://www.policyalternatives.ca/sites/default/files/uploads/publications/National%20Office/2013/07/Gap_in_Gender_Gap_VAW.pdf>.



response requires the Ministry of Health to take three urgent steps that must be funded in the next budget year:

1. Address the shortage of sexual assault nurse examiners across BC

To address the shortage of specialized sexual assault health care providers across the province²⁵, the Ministry of Health must direct and resource Health Authorities to ensure that all 72 health facilities across BC have at least one sexual assault nurse examiner (SANE)/ forensic nurse examiner (FNE) on staff 24/7. We understand that at present only one third of health facilities have 24/7 SANEs/FNEs.

2. Ensure survivors have access to community-based emergency care across the province

To address the need for trauma-informed and community-based care in the immediate aftermath of a sexual assault, the Ministry of Health must provide funding for the operation of community-based Integrated Sexual Assault Clinics in all six geographic regions. The Ministry of Health can coordinate this by requiring each Health Authority to fund existing clinics like the Victoria Sexual Assault Clinic and collaborate with other community-based programs – in particular, sexual assault response teams (SARTs) – to fund the creation of community-based ISAC's in the other five regions. New clinics must be required to develop a comprehensive approach for providing low-barrier, culturally safe and accessible services to Indigenous survivors, racialized survivors, immigrant, refugee survivors and those without status, transgender and gender non-binary survivors, sex trade workers, survivors with disabilities, and survivors using substances. We estimate that the cost of funding six clinics will be approximately \$1.8 million (\$300,000 per clinic x 6 clinics).

3. Ensure counselling services are available when survivors need them, without undue delay

In order to address the growing demand for sexual assault counselling and to address the unacceptably long waitlists for survivors, the Ministry of Health must fund one additional full time equivalent for each existing Stopping the Violence (STV) Counselling program. There are currently 100 STV Counselling programs receiving government funding. We recommend that each program receive an additional \$100,000 for a total of \$10 million. Programs should be required to demonstrate how their services are low-

²⁵ Woodrooffe, S “Make sexual assault response an essential service, province urged” Coast Reporter (February 13, 2020) <<https://www.coastreporter.net/news/local-news/make-sexual-assault-response-an-essential-service-province-urged-1.24075846>>.



barrier and accessible to Indigenous survivors, racialized survivors, immigrant, refugee survivors and those without status, transgender and gender non-binary survivors, sex trade workers, survivors with disabilities, and survivors using substances.

4. Dedicate funding to culturally safe supports and services for Indigenous women, girls, Two Spirit and gender diverse people

While existing community-based sexual assault programs offer services to Indigenous women and girls, Two Spirit people, and Indigenous gender diverse people, very few of these programs and services are led and delivered by members of these communities. This is the case even though Indigenous women are a staggering 12 times more likely to experience violence than non-Indigenous women.²⁶ BC is long overdue for Indigenous survivor-led anti-violence programs – a recommendation outlined in the Final Report of the National Inquiry into Missing and Murdered Indigenous Women and Girls.²⁷ Accordingly, we recommend that the Ministry of Health resource and direct the First Nations Health Authority to urgently engage Indigenous survivors, Nations, communities, and existing front-line organizations like the BC Association of Friendship Centres, to assess the most effective and expeditious way to fund and develop Indigenous-led community-based emergency sexual assault programs and long-term counselling and care programs accessible to Indigenous survivors of all genders across BC.

3. Legal Aid BC should be funded to provide full, comprehensive legal representation for child support applications if the recipient or their child (children) are at risk of family violence.

The COVID-19 pandemic has highlighted and reinforced existing gender inequalities in BC, including after the breakdown of a relationship. Single mothers are more likely to be the primary caregivers of their children and to be poor,²⁸ making up 85% of low-income single parents.²⁹ Single mothers are also more likely to experience family violence, which

²⁶ National Inquiry into Missing and Murdered Indigenous Women and Girls, “Reclaiming Power and Place: The Final Report of the National Inquiry into Missing and Murdered Indigenous Women and Girls”, Volume 1a at p 7 <https://www.mmiwg-ffada.ca/wp-content/uploads/2019/06/Final_Report_Vol_1a-1.pdf>.

²⁷ National Inquiry into Missing and Murdered Indigenous Women and Girls, “Reclaiming Power and Place: The Final Report of the National Inquiry into Missing and Murdered Indigenous Women and Girls”, Volume 1a at p 7 <https://www.mmiwg-ffada.ca/wp-content/uploads/2019/06/Final_Report_Vol_1a-1.pdf>.

²⁸ Canada, Department of Justice “Selected Statistics on Canadian Families and Family Law: Second Edition” (2015), online: <<https://www.justice.gc.ca/eng/rp-pr/fl-lf/famil/stat2000/p1.html>>.

²⁹ Hyslop, Katie. “These Policies Could Help End Single Parent Poverty in BC,” *The Tyee* (2020), online: <<https://thetyee.ca/News/2020/01/24/Policies-End-Single-Parent-Poverty-BC/>>.



often escalates during and after separation.³⁰ The pandemic has only made it more difficult for single mothers to provide for and protect their families. In particular, women have disproportionately lost income during the pandemic; have seen their caregiving responsibilities increase; are at increased risk of family violence; and have less access to social services.³¹

Child support is an important means of improving the economic security and safety of single mother-led families. It aims to, as much as possible, ensure that children enjoy the same standard of living they would enjoy if their parents were together.³² Unfortunately, unpaid child support is a long standing and pernicious issue in BC and across Canada. In 2018, Federal Minister of Justice Jody Wilson-Raybould estimated that unpaid child support in Canada amounts to the billions of dollars. While child support is regarded as the right of the child, the onus on the child's primary caregiver (most often their mother) to realize the child's entitlement through the legal system.³³

Many single mothers, particularly where there are dynamics of abuse, struggle to navigate the family law system to obtain child support. While the Province's Family Maintenance Enforcement Program (FMEP) acts to enforce existing child support orders, it does not assist with obtaining initial child support orders or variations to child support orders. In this context, abusers may use a range of tools, from hiding income to threatening and using violence to coercing child support recipient parents (most often, but not exclusively single mothers) into giving up or accepting a lesser amount of child support.³⁴

The COVID-19 pandemic has created additional barriers to accessing justice. As of the date of these submissions, the Provincial Court and Supreme Court continue to limit in-person services and non-urgent Family Law proceedings, such as child support

³⁰ Chewter, Cynthia. "Best Practices for Representing Clients in Family Violence Cases," Canada Department of Justice (2015), <<https://www.justice.gc.ca/eng/rp-pr/fl-lf/famil/bpfv-mpvf/viol2a.html>>.

³¹ West Coast LEAF, "Submissions to the Canadian Response to the Covid-19 Pandemic Consultation" (2020), online: <http://www.westcoastleaf.org/wp-content/uploads/2020/06/West-Coast-LEAF-Submissions-to-the-Canadian-Response-to-the-COVID-19-Pandemic-.pdf>

³² *D.B.S. v. S.R.G.*, 2006 SCC 37 at para. 38.

³³ Department of Justice Canada, "Strengthening Canada's Family Justice System: Bill C-78 and what it means for Canadians and Legal Professionals" <<https://www.canada.ca/en/department-justice/news/2018/08/strengthening-canadas-family-justice-system-bill-c-78-and-what-it-means-for-canadians-and-legal-professionals.html>>.

³⁴ Law, Vicky. "The Dynamics of Power and Control After Separation in Relation to the Family Law Processes," Battered Women's Support Services (2014), online: <<https://www.bwss.org/the-dynamics-of-power-and-control-after-separation-in-relation-to-the-family-law-processes>>.



hearings.³⁵ It is likely that once non-urgent Family Law proceedings resume, many will take place via telephone or videoconference, which will make navigating these processes and effective communication more challenging for some litigants. At the same time, those seeking assistance with their family law cases may encounter more limited and/or less accessible support services (e.g. duty counsel, legal clinics, and legal advocates).

Legal Aid BC currently provides legal representation to persons seeking *parenting* orders if the parent or their children are at risk of family violence.³⁶ Yet, it only provides legal representation for *child support* applications on an exceptional basis, even if a parent or their children are at risk of family violence.³⁷ Further, this exceptional coverage is subject to Legal Aid BC's available budget, meaning that sometimes there is no coverage at all.³⁸

BC's failure to provide full and comprehensive legal aid coverage for child support applications disproportionately affects those parents with primary childcaring responsibilities, households overwhelmingly lead by single mothers. This failure further undermines the province's efforts to ensure income security and reduce child poverty. We urge this Committee to recommend that the BC Government fund Legal Aid BC to expand legal aid coverage to include child support orders. Distinguishing between child support disputes and other parenting disputes cannot be justified where the risk of family violence may be the same and where child support is so intrinsically connected to the economic security and safety of children and their caregiving parents.

³⁵ Provincial Court's Covid-19 Notice to the Profession #19, online:

<https://www.provincialcourt.bc.ca/downloads/Practice%20Directions/NP%2019%20COVID-19%20Suspension%20of%20Regular%20Court%20Operations.pdf>. Supreme Court's Covid-19 Notice to the Profession #28, online: < https://www.bccourts.ca/supreme_court/documents/COVID-19_Notice_No.28_Resumption_of_Further_Court_Operations_Chambers_Applications_June_5_2020.pdf>

³⁶ IPP Manual, effective November 22, 2018, page 41.

³⁷ Legal Aid BC's Intake Policies and Procedures Manual ("IPP Manual"), effective November 22, 2018, at pg. 41. Note: Legal Aid BC also provides limited services to self-represented parties in child support disputes, on a pilot project basis. See <https://lss.bc.ca/legal_aid/familyIssues>.

³⁸ IPP Manual, effective November 22, 2018, at pg. 41.



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Conclusion

We urge this Committee to build on its commitment to addressing gender-based violence and recommend that the government scale up community-based emergency and long-term health supports for survivors of sexual assault and family law legal aid for survivors of family violence.

Sincerely,

Elba Bendo

Director of Law Reform, West Coast LEAF